Fill in this information to identify you	r case:	
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: ☑ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	Check if this i

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

2. All other names you have used in the last 8 years

Include your married or maiden names.

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Kimberly	
First Name	First Name
Ann	
Middle Name	Middle Name
Brown	
Last Name	Last Name
Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
Kimberly	
First Name	First Name
Ann	
Middle Name	Middle Name
Hannah	
Last Name	Last Name
Kimberly	
First Name	First Name
Ann	
Middle Name	Middle Name
Garner	
Last Name	Last Name
Kimberly	
First Name	First Name
Ann	
Middle Name	Middle Name
Sanders	
Last Name	Last Name

Deb	otor 1 Kimberly Ann Brow	vn	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>9</u> <u>0</u> <u>9</u> <u>0</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EI	Ns. I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN — — — — — — — —
5.	Where you live		If Debtor 2 lives at a different address:
		16021 Biltmore Ave, #11110	
			<u> </u>
		Pflugerville TX 78660 City State ZIP Code	City State ZIP Code
		Travis	,
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Kimberly Ann Bro	wn		Case number (if known)			
Ρ	art 2: Tell the Court A	About Your	Bankruptcy Case				
7.	The chapter of the Bankruptcy Code you		e: (For a brief description of each, sptcy (Form 2010)). Also, go to the	• •	3 ()		
	are choosing to file under	✓ Chapt	Chapter 7				
		☐ Chapt	ter 11				
		☐ Chapt	ter 12				
		☐ Chapt	ter 13				
8.	How you will pay the fee	court f	pay the entire fee when I file my for more details about how you ma ith cash, cashier's check, or mone f, your attorney may pay with a cre	y pay. Typically, if you are pay y order. If your attorney is sub	ying the fee yourself, you may mitting your payment on your		
			d to pay the fee in installments. Iduals to Pay The Filing Fee in Insta		and attach the Application for		
		By law than 1 fee in	v, a judge may, but is not required 150% of the official poverty line that installments). If you choose this confered Waived (Official Form 103B)	to, waive your fee, and may do at applies to your family size ar option, you must fill out the App	o so only if your income is less and you are unable to pay the		
9.	Have you filed for	I ✓I No					
	bankruptcy within the last 8 years?	☐ Yes.					
	lade o you.o.	District		When	Case number		
				MM / DD / YYYY			
		District		When	Case number		
		District		When	Case number		
10.	Are any bankruptcy	☑ No		MINI/DD/YYYY			
	cases pending or being filed by a spouse who is	Yes.					
	not filing this case with you, or by a business	Debtor		Relationsl	nip to you		
	partner, or by an	District			Case number,		
	affiliate?			MM / DD / YYYY	if known		
		Debtor		Relationsl	hip to you		
		District			· · · · · · · · · · · · · · · · · · ·		
				MM / DD / YYYY	if known		
11.	Do you rent your residence?	□ No. ✓ Yes.	Go to line 12. Has your landlord obtained an evi	iction judgment against you?			
			No. Go to line 12. Yes. Fill out Initial Statemen and file it as part of this bank	nt About an Eviction Judgment kruptcy petition.	Against You (Form 101A)		

Debtor 1		Kimberly Ann Brown					Case number (if known)		
Pa	art 3:	Report About Ar	у Ві	usine	sses You Own as a	a Sole Proprieto	or		
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
	busines	roprietorship is a s you operate as an al, and is not a			Name of business, if any				
	•	e legal entity such as ration, partnership, or			Number Street				
	sole pro	ave more than one prietorship, use a e sheet and attach it			City Check the appropriate	box to describe you	State State	ZIP Co	ode
	to this petition.				Health Care Busing Single Asset Real Stockbroker (as c	ness (as defined in 1 I Estate (as defined defined in 11 U.S.C. er (as defined in 11 U	11 U.S.C. § 101(27A)) in 11 U.S.C. § 101(51E § 101(53A))	3))	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>			set ap	filing under Chapter 11, propriate deadlines. If y nt balance sheet, statem f these documents do no	you indicate that you nent of operations, ca	are a small business ash-flow statement, an	debtor, you d federal ir	u must attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.				
		For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT	a small business debt	or accordi	ng to the definition in
	11 U.S.			Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a sm	nall business debtor ac	cording to	the definition in the
Pa	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property or Any	Property That Ne	eds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			No Yes.	What is the hazard?				
					If immediate attention	is needed, why is it r	needed?		
	perishal livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property's	Number Street			
						City		State	ZIP Code

Debtor 1 Kimberly Ann Brown Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. **About Debtor 1:**

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1		Kimberly Ann Brown			Case number (if known)				
P	art 6:	Answer These C	luest	ions for Reporting P	urpos	ses			
16. What kind of debts do yo have?			16a	as "incurred by an individual No. Go to line 16b.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.				
	16b.		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.						
			16c	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.	
17.	7. Are you filing under Chapter 7?			No. I am not filing unde	r Chap	oter 7. Go to line 18.			
	any exc exclude admini are pai availab	estimate that after empt property is ed and strative expenses d that funds will be lef or distribution ecured creditors?	Ø	-		•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Debtor 1	Kimberly Ann Brow	<u>/n</u>	Case number (if known)	
Part 7:	Sign Below			
or you		I have examined this petition, and I decla and correct.	are under penalty of perjury that the information provided is tr	ue
		•	I am aware that I may proceed, if eligible, under Chapter 7, 1 inderstand the relief available under each chapter, and I choo	
		ot pay or agree to pay someone who is not an attorney to help and read the notice required by 11 U.S.C. § 342(b).	me	
		I request relief in accordance with the cha	napter of title 11, United States Code, specified in this petition	1.
		concealing property, or obtaining money or property by fraud i result in fines up to \$250,000, or imprisonment for up to 20 ye and 3571.		
		X /s/ Kimberly Ann Brown Kimberly Ann Brown, Debtor 1	X Signature of Debtor 2	
		Executed on 01/29/2019	Executed on	

MM / DD / YYYY

MM / DD / YYYY

Debtor 1	Kimberly Ann Bro	own	Case number (if know	n)		
represente	not represented by y, you do not need	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) a eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have expl relief available under each chapter for which the person is eligible. I also certify that I have delive the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) app certify that I have no knowledge after an inquiry that the information in the schedules filed with the is incorrect.				
		X /s/ Douglas J. Powell Signature of Attorney for Debtor	Date	01/29/2019 MM / DD / YYYY		
		Douglas J. Powell Printed name				
		The Law Offices of Douglas J. Firm Name	. Powell, P.C.			
		820 West 10th Street Number Street				
		Austin	TX	78701		
		City	State	ZIP Code		
		Contact phone (512) 476-2457	Email address dpowe	ell@dougpowelllaw.com		
		16194900	TX	_		
		Bar number	State			

Fill in this in	formation to ic	lentify your case	and this filing:		
Debtor 1	Kimberly First Name	Ann Middle Name	Brown Last Name		
Debtor 2	T HOL TALLIO	Wildale Hame	Last Hamo		
(Spouse, if filing)) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for	the: WESTERN DI	STRICT OF TEXAS		
Case number (if known)				_	if this is an led filing
Official Form	า 106A/B				
Schedule A	/B: Property	<i>'</i>			12/15
filing together, bo sheet to this form	oth are equally res n. On the top of a	sponsible for supply ny additional pages,	Be as complete and accurate as ing correct information. If more write your name and case num ng, Land, or Other Real E	e space is needed, attach a ber (if known). Answer eve	separate ery question.
No. Go Yes. W	to Part 2. here is the property ar value of the por	· y? rtion you own for all	t in any residence, building, lan of your entries from Part 1, inc	luding any	\$0.00
	escribe Your V				
-		•	n any vehicles, whether they ar also report it on Schedule G: Exe	_	•
3. Cars, vans, t	trucks, tractors, s	port utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1. Make:	Dodge	Check on	an interest in the property? e. or 1 only	Do not deduct secured clai amount of any secured cla Creditors Who Have Claim	
Model: Year:	Charger RT 2012		or 2 only	Current value of the	Current value of the
Approximate milea	-		or 1 and Debtor 2 only ast one of the debtors and anothe	entire property? \$15,445.00	portion you own? \$15,445.00
Other information:			or one or the debtors and anothe	\$13,443.00	φ13,443.00
2012 Dodge Ch 100,000 miles)	arger RT (appro		k if this is community property nstructions)		
			recreational vehicles, other ve ft, fishing vessels, snowmobiles, i		
✓ No ☐ Yes					
	•	•	of your entries from Part 2, inc	luding any	\$15,445.00

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 10 of 100 $^{01/29/2019}\,_{05:04:24pm}$

Debtor 1		Kimberly Ann Brown	Case number (if known)		
Ρ	art 3:	Describe Your Personal and Household Items			
Do	you own	or have any legal or equitable interest in any of the following items?	po Do	rrent value of the rtion you own? not deduct secured ims or exemptions.	
6.		nold goods and furnishings es: Major appliances, furniture, linens, china, kitchenware			
	☐ No ✓ Yes	. Describe See continuation page(s).	_	\$1,095.00	
7.	Electro Exampl	nics es: Televisions and radios; audio, video, stereo, and digital equipment; comp music collections; electronic devices including cell phones, cameras, me	•		
	☐ No ✓ Yes	. Describe See continuation page(s).	_	\$380.00	
8.		ibles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia,	•		
	☐ No ✓ Yes	. Describe See continuation page(s).	_	\$150.00	
9.		nent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, po canoes and kayaks; carpentry tools; musical instruments	ol tables, golf clubs, skis;		
	✓ No ☐ Yes	s. Describe	_		
10.	Firearm Exampl	es: Pistols, rifles, shotguns, ammunition, and related equipment			
	✓ No ☐ Yes	. Describe	_		
11.	Clothes Exampl	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories			
	_	. Describe Women's Clothing, Shoes & Accessories	_	\$100.00	
12.	Jewelry Exampl	 r es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver 	irloom jewelry, watches, gems,		
	□ No ✓ Yes	. Describe Various pieces of jewelry	_	\$100.00	
13.		m animals es: Dogs, cats, birds, horses			
	☐ No ✓ Yes	. Describe dog Sharpei/Chuhua	_	\$100.00	
14.	Any oth	ner personal and household items you did not already list, including any list	health aids you		
		. Give specific rmation	_		
15.		e dollar value of all of your entries from Part 3, including any entries for	pages you have	\$1,925.00	

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 11 of 100 $^{01/29/2019\ 05:04:24pm}$

Debtor 1		Kimberly Ann Brown		Case number (if known)		
P	art 4:		Describe Your Finar	ncial Assets		
Do	you owr	or	have any legal or equita	able interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	les:	Money you have in your petition	wallet, in your home, in a safe deposit b	ox, and on hand when you file your	
	□ No ✓ Yes				Cash:	\$60.00
17.	•		• •	her financial accounts; certificates of de other similar institutions. If you have mu	•	
	□ No			Institution name:		
		'.1.	Checking account:	A+ Federal Credit Union (Check	ing 445009-s12)	\$0.00
	17	.2.	Savings account:	A+ Federal Credit Union Membe	·	\$10.00
	17	.3.	Savings account:	A+ Federal Credit Union Membe		\$10.00
	17	.4.	Other financial accoun	t: A+ Federal Credit Union Secure	d Line of credit savings	\$505.26
18.	Example No.	les:	utual funds, or publicly t Bond funds, investment	accounts with brokerage firms, money m	narket accounts	
19.	-		cly traded stock and inte	erests in incorporated and unincorpor , and joint venture	ated businesses, including	
	info	orma	Give specific ation about Name c	of entity:	% of ownership:	
20.	Negotia	able	instruments include pers	and other negotiable and non-negotia onal checks, cashiers' checks, promisso se you cannot transfer to someone by sig	ory notes, and money orders.	
	info	orma	Give specific ation about lssuer r	name:		
21.			t or pension accounts Interests in IRA, ERISA, profit-sharing plans	Keogh, 401(k), 403(b), thrift savings acc	counts, or other pension or	
		s. L	ist each nt separately. Type of a	ccount: Institution name:		

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 12 of 100 $^{01/29/2019\ 05:04:24pm}$

Deb	otor 1 Kimberly Ann Brown	Case number (if known)	
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you m Examples: Agreements with landlords, prepaid rent, public utilit companies, or others	· · ·	
	✓ No YesInstitution name	or individual:	
23.	Annuities (A contract for a specific periodic payment of money	y to you, either for life or for a number of years)	
24.	Interests in an education IRA, in an account in a qualified A 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	BLE program, or under a qualified state tuition progr	ram.
	✓ No Yes Institution name and description. S	Separately file the records of any interests. 11 U.S.C. §	521(c)
25.	Trusts, equitable or future interests in property (other than powers exercisable for your benefit		
	NoYes. Give specific information about them	_	
26.	Patents, copyrights, trademarks, trade secrets, and other in Examples: Internet domain names, websites, proceeds from ro		
	NoYes. Give specific information about them	-	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative as No Yes. Give specific information about them	ssociation holdings, liquor licenses, professional licenses	s
Mor	ney or property owed to you?	po D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
28.	Tax refunds owed to you		
	✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Federal: State: Local:	
29.	Family support Examples: Past due or lump sum alimony, spousal support, ch	uild support, maintenance, divorce settlement, property s	ettlement
	✓ No✓ Yes. Give specific information	Alimony:	
	Tes. Give specific information	Maintenance:	
		Support:	
		Divorce settlement:	
		Property settlement:	

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 13 of 100 100

Deb	tor 1 Kimberly Ann Brown	Case number (if known)	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disa compensation, Social Security benefits; unpaid loa		
	✓ No✓ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings	account (HSA); credit, homeowner's, or renter's insura	nce
	✓ No Yes. Name the insurance company of each policy and list its value Company name:	Beneficiary: Su	ırrender or refund value:
32.	Any interest in property that is due you from someone who If you are the beneficiary of a living trust, expect proceeds from entitled to receive property because someone has died		
	✓ No☐ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed Examples: Accidents, employment disputes, insurance claims	• •	
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, rights to set off claims	including counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, incluattached for Part 4. Write that number here		\$585.26
Pa	art 5: Describe Any Business-Related Property	You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any b	business-related property?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe		
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, p desks, chairs, electronic devices	orinters, copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe		

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 14 of 100 $^{01/29/2019\ 05:04:24pm}$

Deb	tor 1	Kimberly Ann Brown	Case number (if known)
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of yo	ur trade
	✓ No ☐ Yes	s. Describe	
41.	Invento	ry	
	✓ No ☐ Yes	s. Describe	
42.	Interes	ts in partnerships or joint ventures	
	✓ No	s. Describe Name of entity:	% of ownership:
43.	Custon	ner lists, mailing lists, or other compilations	
	✓ No ☐ Yes	 Do your lists include personally identifiable information (as defined in No Yes. Describe 	n 11 U.S.C. § 101(41A))?
44.	Any bu	siness-related property you did not already list	
	✓ No	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for d for Part 5. Write that number here	
46.		Describe Any Farm- and Commercial Fishing-Related Proof you own or have an interest in farmland, list it in Part 1. own or have any legal or equitable interest in any farm- or commercial	
	✓ No.	Go to Part 7. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a		dame of exemptions.
	✓ No Yes	es: Livestock, poultry, farm-raised fish	
48.	Crops-	either growing or harvested	
		s. Give specific rmation	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of tra	de
	✓ No ☐ Yes	s	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No	i	

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 15 of 100 $^{01/29/2019\ 05:04:24pm}$

Deb	tor 1	Kimberly Ann Brown	Case nu	ımber (if known)		
51.	Any farr	n- and commercial fishing-related property you did not a	already list			
		Give specific mation				
52.		dollar value of all of your entries from Part 6, including a for Part 6. Write that number here		_	•	\$0.00
Pa	art 7: [Describe All Property You Own or Have an Inte	erest in That You D	Did Not List Abov	/e	
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership				
	✓ No ☐ Yes.	Give specific information.				
54.	Add the	dollar value of all of your entries from Part 7. Write that	number here		, [_	\$0.00
Pa	art 8: L	ist the Totals of Each Part of this Form			`	
55.	Part 1: 1	Total real estate, line 2			-	\$0.00
56.	Part 2: 1	otal vehicles, line 5	\$15,445.00			
57.	Part 3: 1	otal personal and household items, line 15	\$1,925.00			
58.	Part 4: 1	Total financial assets, line 36	\$585.26			
59.	Part 5: 1	otal business-related property, line 45	\$0.00			
60.	Part 6: 1	otal farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: 1	otal other property not listed, line 54	\$0.00			
62.	Total pe	rsonal property. Add lines 56 through 61	\$17,955.26	Copy personal property total	+	\$17,955.26
63.	Total of	all property on Schedule A/B. Add line 55 + line 62			[\$17,955.26

Del	otor 1	Kimberly Ann Brown	Case number (if known)	
6.	House	ehold goods and furnishings (details):		
٥.		reseat(s)		\$100.00
	Enter	tainment Center / Tv Cabinet		\$30.00
	COFF	EE TABLE		\$20.00
	END	TABLES	_	\$10.00
	KITCI	HEN TABLE	_	\$100.00
	Wash	ner & Dryer	<u>-</u>	\$300.00
	CLOT	THES DRYER	<u>-</u>	\$300.00
	DISH	ES/FLATWARE	-	\$5.00
	POTS	S/PANS/COOKWARE	-	\$10.00
	1 BE	0	-	\$200.00
	LAMF	PS / ACCESSORIES	-	\$20.00
7.	Electr	onics (details):		
	42" fl	at screen	-	\$60.00
	32" fl	at screen	-	\$40.00
	PERS	SONAL COMPUTER	-	\$80.00
	CELL	ULAR TELEPHONES	-	\$200.00
8.	Collec	ctibles of value (details):		
	pics o	of family	-	\$50.00
	painti	ings	-	\$100.00

Fill in this in	formation to iden	tify your o	case:					
Debtor 1	Kimberly First Name	Ann Middle Name	Brown Last Name					
Debtor 2 (Spouse, if filing)		Middle Name						
	ankruptcy Court for the:			EXAS	3		Object Williams	
Case number (if known)							Check if this is an amended filing	
Official Form	106C							
	: The Property	You Cl	aim as Exemp	t				04/16
Using the property space is needed, f	you listed on Schedul	<i>le A/B: Prope</i> s page as m	erty (Official Form 106	SA/B)	as your so	urce, list the	esponsible for supplying correct ir e property that you claim as exem ssary. On the top of any addition	npt. If more
is to state a spec exempted up to the receive certain be exemption of 100	ific dollar amount as on the amount of any appenents, and tax-exem	exempt. Alt licable stat pt retiremer e under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	claii emp imite mpti	m the full fa tionssuch ed in dollar on to a par	nir market v n as those amount. H ticular doll	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an ar amount and the value of the le statutory amount.)
Part 1: Ide	entify the Propert	y You Cla	im as Exempt					
1. Which set of	exemptions are you	claiming?	Check one only,	even	if your spou	ıse is filing	with you.	
	claiming state and fed claiming federal exem			11 U	.S.C. § 522(b)(3)		
	perty you list on Sche			npt, f	fill in the in	formation I	below.	
•	of the property and li t lists this property	ne on	Current value of the portion you own		ount of the mption you	ı claim	Specific laws that allow exen	nption
			Copy the value from Schedule A/B		eck only one h exemption			
Brief description: 2012 Dodge Ch miles) Line from Schedul	arger RT (approx. 1 le A/B: <u>3.1</u>	00,000	\$15,445.00		\$0. 100% of fa value, up tapplicable limit	air market to any	11 U.S.C. § 522(d)(2)	
Brief description:			\$100.00		\$100		11 U.S.C. § 522(d)(3)	
1 Loveseat(s) Line from Schedul	de A/B: 6				100% of favalue, up tapplicable limit	to any		
(Subject to ac		nd every 3 y	rears after that for cas	es fi				

Kimberiy Ann Brown			Case number	r (if known)
Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description: Entertainment Center / Tv Cabinet Line from Schedule A/B: 6	\$30.00		\$30.00 100% of fair market value, up to any	11 U.S.C. § 522(d)(3)
Line Holli Schedule A/B			applicable statutory limit	
Brief description: COFFEE TABLE	\$20.00	<u> </u>	\$20.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: END TABLES	\$10.00		\$10.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: KITCHEN TABLE	\$100.00	<u> </u>	\$100.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: Washer & Dryer	\$300.00		\$0.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: CLOTHES DRYER	\$300.00	<u> </u>	\$300.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: DISHES / FLATWARE	\$5.00		\$5.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: POTS / PANS / COOKWARE	\$10.00		\$10.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6		_	value, up to any applicable statutory limit	
Brief description: 1 BED	\$200.00		\$200.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	

Aimberly Ann Brown			Case number	r (if known)
Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the emption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description: LAMPS / ACCESSORIES	\$20.00	. ☑	\$20.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:6			value, up to any applicable statutory limit	
Brief description: 42" flat screen	\$60.00		\$60.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7			value, up to any applicable statutory limit	
Brief description: 32" flat screen	\$40.00	. ☑ □	\$40.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7			value, up to any applicable statutory limit	
Brief description: PERSONAL COMPUTER	\$80.00	<u> </u>	\$80.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7			value, up to any applicable statutory limit	
Brief description: CELLULAR TELEPHONES	\$200.00	<u> </u>	\$200.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7			value, up to any applicable statutory limit	
Brief description: pics of family	\$50.00	<u> </u>	\$50.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:8			value, up to any applicable statutory limit	
Brief description: paintings	\$100.00		\$100.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 8		_	value, up to any applicable statutory limit	
Brief description: Women's Clothing, Shoes & Accessories	\$100.00	. ☑ □	\$100.00 100% of fair market	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 11			value, up to any applicable statutory limit	
Brief description: Various pieces of jewelry	\$100.00	. ☑ □	\$100.00 100% of fair market	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:12		_	value, up to any applicable statutory limit	

Debtor 1	Kimberly Ann Brown			Case numbe	r (if known)
Part 2:	Additional Page				
	ription of the property and line on 4/B that lists this property	Current value of the portion you own	the portion you exemption y		Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
	ption: pei/Chuhua Schedule A/B:13	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri Cash on H Line from S	•	\$60.00		\$60.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Savings 5	al Credit Union Membership	<u>\$10.00</u>		\$10.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
savings a	ption: al Credit Union Membership account 3444 Schedule A/B: 17.3	\$10.00		\$10.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
credit sav	al Credit Union Secured Line of	<u>\$505.26</u>		\$505.26 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Kimberly Ann Brown CASE NO

CHAPTER 7

Scheme Selected: Federal

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$15,445.00	\$21,506.74	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,095.00	\$1,100.00	\$795.00	\$795.00	\$0.00
7.	Electronics	\$380.00	\$0.00	\$380.00	\$380.00	\$0.00
8.	Collectibles of value	\$150.00	\$0.00	\$150.00	\$150.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
12.	Jewelry	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
13.	Non-farm animals	\$100.00	\$0.00	\$100.00	\$100.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$60.00	\$0.00	\$60.00	\$60.00	\$0.00
17.	Deposits of money	\$525.26	\$0.00	\$525.26	\$525.26	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Kimberly Ann Brown CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

TOTALS:

		Gross	Total	Total Amount Total Amount		
No.	Category	Property Value	Encumbrances	Total Equity	Exempt	Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

\$22,606.74

\$2,210.26

\$2,210.26

\$0.00

\$17,955.26

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Kimberly Ann Brown CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

TOTALS:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description		Market Value	Lie	en Equity
Real Property (None)				
Personal Property (None)				
TOTALS:		\$0.00	\$0.	00 \$0.00
Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt.				
Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property (None) Personal Property (None)				

\$0.00

\$0.00

\$0.00

\$0.00

Summary	
A. Gross Property Value (not including surrendered property)	\$17,955.26
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$17,955.26
D. Gross Amount of Encumbrances (not including surrendered property)	\$22,606.74
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$22,606.74
G. Total Equity (not including surrendered property) / (A-D)	\$2,210.26
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$2,210.26
J. Total Exemptions Claimed (Wild Card Used: \$585.26, Available: \$12,514.74)	\$2,210.26
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

Fill in this info	ormation to ide	ntify your case	:			
Debtor 1	Kimberly	Ann	Brown			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for th	e: WESTERN DIS	STRICT OF TEXAS			
Case number						
(if known)					Check if this is amended filing	
Official Forms	40CD					9
Official Form				_		
Schedule D:	Creditors W	ho Have Cla	ims Secured by	y Property		12/15
1. Do any credit No. Chee Yes. Fill Part 1: Lis 2. List all secure	additional pages, we core have claims see ck this box and subrin all of the informate t All Secured Claims. If a cred	cured by your promit this form to the coion below.	court with your other sch	vn).		
creditor has a	creditor separately for particular claim, list ible, list the claims in e.	the other creditors	in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the secures the	property that	\$21,506.74	\$15,445.00	\$6,061.74
A+ Federal Cred Creditor's name 6420 US Highwa Number Street			e Charger RT and			
Austin City Who owes the det ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and D ☐ At least one of ☐ Check if this community	Debtor 2 only the debtors and and	Continge Unliquida Disputed Nature of lie An agree Statutory Judgmen	n. Check all that apply. ment you made (such a lien (such as tax lien, m at lien from a lawsuit cluding a right to offset)	s mortgage or secured	car loan)	
Date debt was inc	urred <u>06/15/201</u>	8 Last 4 digits	of account number	4 L 4 2		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$21,506.74

Debtor 1 Kimberly Ann Brown		_ Case number (if	known)	
Part 1: Additional Page After listing any entries on this page, number them sequentially from the previous page.		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
A+Federal Credit Union Creditor's name 15108 FM1825 Number Street	Describe the property that secures the claim: 2012 Dodge Charger RT and Savings account	\$462.89	\$0.00	\$462.89
Pflugerville TX 78660 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, media) Judgment lien from a lawsuit Other (including a right to offset) Secured Line of Credit	mortgage or secured	car loan)	
Date debt was incurred Various	Last 4 digits of account number	4 L 8 0		
A+Federal Credit Union Creditor's name 15108 FM1825 Number Street	Describe the property that secures the claim: 2012 Dodge Charger RT and Savings account	\$1,500.00	\$0.00	\$1,500.00
Pflugerville TX 78660 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medical Judgment lien from a lawsuit) Other (including a right to offset) Holiday Line of Credit	mortgage or secured	car loan)	
Date debt was incurred Various	Last 4 digits of account number	4 L 4 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,962.89

Debtor 1	Kimberly Ann Brown	Case number (if known)			
Additional Page Part 1: After listing any entries on this page, number them sequentially from the previous page.		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Creditor's name Attn: Legal Number Str PO Box 23 Beaumont City Who owes tt Debtor 1 Debtor 2 At least	TX 77704 State ZIP Code he debt? Check one. only	Describe the property that secures the claim: Washer & Dryer As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medulus Judgment lien from a lawsuit) Other (including a right to offset) Purchase Agreement	mortgage or secured	\$300.00 car loan)	\$800.00
	nmunity debt	Lost 4 divite of appoint number	7 0 7 0		
Date debt w	as incurred <u>various</u>	Last 4 digits of account number	7 9 7 0		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,100.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$24,569.63

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 27 of 100 $^{01/29/2019\ 05:04:27pm}$

Fill in this inf	ionmotion to i	danstife e e e e	•••			
FIII IN THIS IN	formation to it	dentify your ca	ase:			
Debtor 1	Kimberly	Ann	Brown			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	inkruptcy Court for	the: WESTERN	DISTRICT OF TEXAS			
Case number (if known)				[Check if this amended filir	
					amended iiii	9
Official Form	106E/F					
Schedule E	/F: Creditor	s Who Have	Unsecured Claims			12/15
If more space is note to this page. On t	needed, copy the the top of any ad	Part you need, fil ditional pages, w	claims that are listed in Schedul Il it out, number the entries in the rite your name and case number ecured Claims	boxes on the left.		
		unsecured clain				
N- 0-	to Part 2.	, unocourou orani	io againot you .			
✓ No. Go	IO Part 2.					
Ц 100.						
claim. For ea show both pri more space is claim, list the	nch claim listed, id ority and nonpriori is needed for priori other creditors in	entify what type of ty amounts. As m ty unsecured clain Part 3.	creditor has more than one priority claim it is. If a claim has both prior uch as possible, list the claims in ans, fill out the Continuation Page of a instructions for this form in the instructions.	rity and nonpriority ar alphabetical order acc Part 1. If more than struction booklet.	nounts, list that cording to the cree	laim here and ditor's name. If
				Total claim	Priority amount	Nonpriority amount
2.1						
Priority Creditor's Nam	ne		Last 4 digits of account number	. — — — —	_	
November Office			When was the debt incurred?			
Number Street					_	
			As of the date you file, the claim	is: Check all that ap	ply.	
			Contingent Unliquidated			
			Disputed			
City	State	ZIP Code				
Who incurred the	debt? Check of	one.	Type of PRIORITY unsecured cl	aim:		
Debtor 1 only			☐ Domestic support obligations			
Debtor 2 only	Dahtan O L		Taxes and certain other debts		ment	
Debtor 1 and 0	Debtor 2 only the debtors and a	another	Claims for death or personal i	njury while you were		
_			intoxicated			
Is the claim subje	claim is for a con	miumiy debt	Other. Specify			
is the claim subje ☐ No	CL TO OHSEL!					
Yes						

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 28 of 100 $^{01/29/2019\ 05:04:27pm}$

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: List All of Your NONPRIORIT	'Y Unsecured Claims	
Do any creditors have nonpriority unsecured	I claims against you?	
	. Submit this form to the court with your other schedules.	
If a creditor has more than one nonpriority unset type of claim it is. Do not list claims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify we luded in Part 1. If more than one creditor holds a particular claim, list the other creditor unsecured claims, fill out the Continuation Page of Part 2. Total of	rs in
4.1	\$3,	,516.17
Ace Cash Express	Last 4 digits of account number 5 4 1 2	
Nonpriority Creditor's Name Collections Department	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
1231 Greenway Dr., Suite 700	_ Contingent	
	Unliquidated	
Irving TX 75038-2511	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?	,,	
☑ No		
Yes		
4.2	\$	\$950.00
Advance America(NCP Finance)	_ Last 4 digits of account number _0_9_9_8_	
Nonpriority Creditor's Name 205 Sugar Camp Circle	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Dayton OH 45409	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	payday loan	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$975.00
Approved Money Center	Last 4 digits of account number 6 0 0 0	
Nonpriority Creditor's Name 2604 West Pecan St, Ste B	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
Dilamandilla TV 7000	Disputed	
Pflugerville TX 78660 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset? No		
Yes		
4.4		\$309.00
ARA Imaging	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 11/28/17	
PO Box 4099 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Austin TX 78765-4099	_	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical Services	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.5		\$798.81
Aspen Peak Financial	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,233.96
Atlas Credit Co	Last 4 digits of account number 5 0 0 1	
Nonpriority Creditor's Name 1701 South Mays Ste K&L	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Round Rock TX 78664		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset? ✓ No ☐ Yes		
4.7		\$950.00
Balance Credit	Last 4 digits of account number 1 _2 _3	
Nonpriority Creditor's Name PO Box 4356	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Disputed	
Houston TX 77210 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify payday loan	
Is the claim subject to offset?	payany .com	
No No		
Yes		
4.8		\$500.00
Capital One Bank USA	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130-0281	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
4.9		\$2,000.00
CashNetUSA.com	Last 4 digits of account number 7 0 3 0	
Nonpriority Creditor's Name	When was the debt incurred? various	
200 W. Jackson Blvd., 4th Flr. Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Chicago IL 60606-6941	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?		
✓ No Yes		
4.10		\$1,500.00
Check N Go (Integrity Funding)	_ Last 4 digits of account number 7 4 6 5	
Nonpriority Creditor's Name 84 Villa Rd	When was the debt incurred? 4/22/2017-5/31/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	□ Unliquidated □ Disputed	
Greenville SC 29615		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	payday loan	
No		
Yes		
4.11		\$318.75
Clinical Pathology Laboratories, Inc.	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 141669	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78714-1669		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset?		
✓ No ☐ Yes		

Kimberiy Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.12		\$1,379.00
Credit First National Assoc.	Last 4 digits of account number χ χ χ	
Nonpriority Creditor's Name PO Box 81344	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Cleveland OH 44188	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.13		\$1,046.00
Emoney (TMBTX Financial)	Last 4 digits of account number 9 2 9 4	
Nonpriority Creditor's Name	When was the debt incurred? various	
Number Street Steet 8162	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Prairie Village KS 66208	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?		
☑ No		
Yes		

Kimberiy Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.14 First Premier Bank	Last 4 digits of account number <u>x x x x</u>	\$1,451.00
Nonpriority Creditor's Name 3820 N Louise Ave.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Sioux Falls SD 57107-0145	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
✓ No		
Yes		
Also Account number: 517800638410xxxx		
4.15		¢55.05
	Local A district of account number 2 0 0 2	<u>\$55.05</u>
G.L.A. Collection Company Nonpriority Creditor's Name	_ Last 4 digits of account number 2 0 9 3	
2630 Gleeson Lane	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	□ Disputed	
Louisville KY 40299 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset?		
No You		
Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.16		\$0.00
Internal Revenue Service	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Centralized Insolvency Operations Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 7346	_ ☐ Contingent	
	Unliquidated	
Philadelphia PA 19101-7346	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	laxes	
✓ No Yes		
4.17		\$3,000.00
Ivy Funding Eight, LLC Nonpriority Creditor's Name	_ Last 4 digits of account number <u>0 4 0 5</u>	
22 W Bryan St Ste 208	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Savannah GA 31401	☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	payday loan	
Is the claim subject to offset?		
☑ No		
Yes		
4.18		\$2,000.00
LB Woodlands, LLC	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? various	
407 Rhetoric Way Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Dilumanilla TV 7000	Disputed	
Pflugerville TX 78660 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Type of Non-Riokit if unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
Check if this claim is for a community debt	Breach of Lease	
Is the claim subject to offset? ✓ No		
✓ No Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	ured Claims Continuation Page	
After listing any entries on this page, number th previous page.	em sequentially from the	Total claim
4.19		\$629.23
Lend Up (Flurish Inc.)	Last 4 digits of account number 4 1 7 6	
Nonpriority Creditor's Name 225 Bush Street 11th floor	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	──	
San Francisco CA 94104 City State ZIP Code	_ _ _	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Other. Specify Pay Day Loan	
Is the claim subject to offset?	, ,	
✓ No Yes		
4.20		\$914.02
Longhorn Emergency Medical	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 638761	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
Oin singerti	Disputed	
CincinnatiOH45263-8761CityStateZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset?		
☑ No □ Yes		
4.21		\$800.00
Majestic Lake Financial Nonpriority Creditor's Name	Last 4 digits of account number 1 2 3	
635 Hwy 20, K	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
Illimoral also	Disputed	
Upper LakeCA95485CityStateZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.22		\$679.11
Money Key	Last 4 digits of account number 1 2 3	
Nonpriority Creditor's Name	When was the debt incurred? various	
3422 Old Capital Trail Ste 1613 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Wilmington DE 19808	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	payday loan	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.23		
	Last A Parks of account numbers 4 . 0 . 0	\$650.00
My Payday Loan Nonpriority Creditor's Name	Last 4 digits of account number 1 2 3	
2599 S. San Jacinto Ave	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
San Jacinto CA 92583 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	payday loan	
No No		
Yes		
4.24		\$165.96
NAU Urology Specialists	Last 4 digits of account number	Ψ100.30
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 14000 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ Contingent	
	Unliquidated	
Belfast ME 04915	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	dildi doi filodo	
✓ No		
Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.25		\$580.00
Power Finance Texas	Last 4 digits of account number 4 6 7 4	
Nonpriority Creditor's Name 9595 Six Pines Dr, Ste 8210	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
The Woodlands TX 77380		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	payday loan	
✓ No ☐ Yes		
4.26		\$164.00
St. David's Heart & Vascular, PLLC Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 668	When was the debt incurred? 3/31/17	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
Brontwood TN 27024 0660	Disputed	
Brentwood TN 37024-0668 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset?		
✓ No Yes		
4.27		\$416.00
Sun Loan Company	Last 4 digits of account number6557_	
Nonpriority Creditor's Name 1736 N. Mays St.	When was the debt incurred? various	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Power d Position TV Tools 2017	Disputed	
Round Rock TX 78664-2915 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Pay Day Loan	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.28		\$1,806.00
Synchrony Bank/Care Credit	Last 4 digits of account number x x x x	
Nonpriority Creditor's Name	When was the debt incurred?	
Attn: Bankruptcy Dept. Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965036	_ ☐ Contingent	
	Unliquidated	
	Disputed	
Orlando FL 32896-5036 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No No		
Yes		
charged off		
4.29		\$957.00
Texas Acceptance (Millenium Loan Fund)	Last 4 digits of account number 0 0 1 3	
Nonpriority Creditor's Name		
750 New Orleans St, 2nd Floor		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Chicago IL 60654	-	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations original substitution are accounted as discussed in the substitution of the subs	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Pay Day Loan	
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30		\$226.41
Texas Oncology Corporate Office	Last 4 digits of account number	
Nonpriority Creditor's Name 12221 Merit Dr Ste 500	When was the debt incurred? 9/29/17	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Dallas TX 75251 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset? No		
✓ No ☐ Yes		
4.31		\$1,599.00
Touchstone Imaging Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 102107	When was the debt incurred? 2/28/18	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Atlanta GA 30368-2107	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical Services	
Is the claim subject to offset?	Medical Services	
✓ No		
Yes		
4.32		\$913.00
TxTag Customer Service Center	Last 4 digits of account number 7 1 7 1	
Nonpriority Creditor's Name	When was the debt incurred? various	
12719 Burnet Rd. Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78727 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Toll Fees	
Is the claim subject to offset?		
✓ No □ Yes		

Debtor 1 Kimberly Ann Brown	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.33		Unknown
WebBank/Fingerhut	_ Last 4 digits of account number _x _x _x _x _x	
Nonpriority Creditor's Name	When was the debt incurred?	
6520 Ridgewood Rd. Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
	Disputed	
Saint Cloud MN 56303 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations spining out of a consection agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
charged off		
4.34		\$560.00
World Acceptance Corp.	Last 4 digits of account number	Ψ300.00
Nonpriority Creditor's Name		
Attn: Bankruptcy Processing	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6429	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Greenville SC 29606-6429		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Pay Day Loan	
Is the claim subject to offset?	,,	
▼ No		
Yes		

Debtor 1 Kimber	rly Ann Brown	Case number (if known)	Case number (if known)		
Part 2: Your	NONPRIORITY Unse	ecured Claims Continuation Page			
After listing any entroprevious page. 4.35	ies on this page, number	them sequentially from the	Total claim		
World Finance Co Nonpriority Creditor's Nar PO Box 6429 Number Street		Last 4 digits of account number x x x x x When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated			
	otor 2 only e debtors and another im is for a community deb	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify			

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 42 of 100 $^{01/29/2019}\,_{05:04:28pm}$

Debtor 1	Kimberly An	n Brow	n		Cas	e number (if known)
Part 3:	List Other	s to Be	Notified Abou	ut a Debt That You Alread	y Li	sted
For exa credito debts t	ample, if a colle r in Parts 1 or : hat you listed i	ection ag 2, then li n Parts	gency is trying to state state state state state state state and state s	collect from you for a debt you agency here. Similarly, if you h itional creditors here. If you d	owe ave r	ebt that you already listed in Parts 1 or 2. to someone else, list the original more than one creditor for any of the have additional parties to be notified for
Ad Astra R Name	ecovery Serv	/ices, Ir	ic.	On which entry in Part 1 or	Part :	2 did you list the original creditor?
7330 W. 33	rd St. N., Sui	te 118		Line 4.17 of (Check one)		Part 1: Creditors with Priority Unsecured Claims
Number S	Street			_	\checkmark	Part 2: Creditors with Nonpriority Unsecured Claims
Wichita		KS	67205-9370	Last 4 digits of account nur	nber	
City		State	ZIP Code	_		
Advance A	merica			On which entry in Part 1 or	Part :	2 did you list the original creditor?
PO Box 30	58 Street			Line 4.2 of (Check one)	: □	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Spartanbu City	rg	SC State	29304-3058 ZIP Code	Last 4 digits of account nur	nber	
	Medical Colle	ction A	gency	On which entry in Part 1 or	Part	2 did you list the original creditor?
	ster Plaza, Bu	uilding	4	Line 4.11 of (Check one)	· 🗆	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Elmsford City		NY State	10523 ZIP Code	Last 4 digits of account nur	nber	<u>7</u> <u>A</u> <u>1</u> <u>8</u>
Atlas Cred	it Co., Inc.			On which entry in Part 1 or	Part :	2 did you list the original creditor?
Name	ande Blvd.			Line 4.6 of (Check one)	: □	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Tyler City		TX State	75703-0554 ZIP Code	Last 4 digits of account nur	nber	
Check N G	0			On which entry in Part 1 or	Part :	2 did you list the original creditor?
Name 7755 Mont	gomery Rd			Line 4.10 of (Check one)	:	Part 1: Creditors with Priority Unsecured Claims
	Street			_	✓	Part 2: Creditors with Nonpriority Unsecured Claims
		On .	45226	 Last 4 digits of account nur 	nber	
Cincinnati City		OH State	45236 ZIP Code	_		

Debtor 1 Kimberly Ar	Kimberly Ann Brown Case number (if known)				number (if known)	
Part 3: List Other	rs to B	e Notified Abo	ut a Debt That Yo	ou Already	Lis	sted Continuation Page
Credit Control, LLC			On which entry i	n Part 1 or P	art 2	2 did you list the original creditor?
PO Box 546			Line 4.8 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street	`		\square	Part 2: Creditors with Nonpriority Unsecured Claims		
			 Last 4 digits of a 	ccount numl	oer	
Hazelwood City	MO State	63042 ZIP Code	_			
Credit Management, LF	•		On which entry i	n Part 1 or P	art 2	2 did you list the original creditor?
Name 4200 International Pkw	V.		Line 4.4 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street	,			,		Part 2: Creditors with Nonpriority Unsecured Claims
Carrolton	TX	75007-1912	 Last 4 digits of a 	ccount numl	oer	
City	State	ZIP Code	<u> </u>			
CTRMA Processing Name			On which entry in	n Part 1 or P	art 2	2 did you list the original creditor?
PO Box 16777			Line 4.32 _ of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street			_		V	Part 2: Creditors with Nonpriority Unsecured Claims
			 Last 4 digits of a 	ccount numl	oer	
Austin City	TX State	78761 ZIP Code				
eMoney Missouri, LLC			On which entry i	n Part 1 or P	art 2	2 did you list the original creditor?
Name 8700 State Line Rd Ste	350		Line 4.13 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street			·			Part 2: Creditors with Nonpriority Unsecured Claims
	1/0	00000	 Last 4 digits of a 	ccount numl	oer	
City	KS State	66206 ZIP Code	_			
IRS Insolvency Office			On which entry i	n Part 1 or P	art 2	2 did you list the original creditor?
Name 300 E. 8th St.			Lineof (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street Mail Stop 5026AUS			_		$\overline{\mathbf{A}}$	Part 2: Creditors with Nonpriority Unsecured Claims
Austin	TX	78701	 Last 4 digits of a 	ccount numl	oer	
City	State	ZIP Code	_			
Longhorn Emergency			On which entry i	n Part 1 or P	art 2	2 did you list the original creditor?
Name 8902 Otis Ave, Ste 103	4		Line 4.20 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street			` _	ŕ	_	Part 2: Creditors with Nonpriority Unsecured Claims
Indianapolis	IN	46216	 Last 4 digits of a 	ccount numl	oer	
City	State	ZIP Code				

Debtor 1	Kimberly Ann Brov	/n	Case number (if known)			
Part 3:	List Others to B	e Notified Abo	out a Debt That You Already Listed Continuation Page			
LVNV Fund	ling, LLC		On which entry in Part 1 or Part 2 did you list the original creditor?			
PO Box 12	69		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Clain	ns		
	treet		Part 2: Creditors with Nonpriority Unsecured C			
			— Last 4 digits of account number 8 8 1 6			
Greenville	SC	29602	— Last 4 digits of account number <u>8 8 1 6</u>			
City	State	ZIP Code				
	& Professional Cre	dit Bureau	On which entry in Part 1 or Part 2 did you list the original creditor?			
PO Box 14	0675		Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claim	ns		
	treet		Part 2: Creditors with Nonpriority Unsecured C			
		70744 0075	— Last 4 digits of account number			
Austin City	TX State	78714-0675 ZIP Code	<u> </u>			
	Loan Fund, LLC		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 4600 New I	Linden Road		Line 4.29 of <i>(Check one):</i> \square Part 1: Creditors with Priority Unsecured Clain	ns		
	treet		✓ Part 2: Creditors with Nonpriority Unsecured C			
			— Last 4 digits of account number			
Wilmington		19808	<u> </u>			
City	State	ZIP Code				
Mobile Loa	ns		On which entry in Part 1 or Part 2 did you list the original creditor?			
PO Box 14	09		Line of (Check one):	ns		
Number S	treet		Part 2: Creditors with Nonpriority Unsecured C	Claims		
			— Last 4 digits of account number			
Macksville City	LA State	71351 ZIP Code	<u> </u>			
,						
	redit Adjusters		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 327 W. 4th	Ave.		Line of (Check one): Part 1: Creditors with Priority Unsecured Clain	ns		
Number S	treet		Credit Collection Part 2: Creditors with Nonpriority Unsecured C	Claims		
			— Last 4 digits of account number			
Hutchinson		67501	<u> </u>			
City	State	ZIP Code				
Phoenix Fi	nancial Services, Ll	_C	On which entry in Part 1 or Part 2 did you list the original creditor?			
8902 Otis A	Ave, Suite 103A		Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claim	ns		
Number S	treet		Part 2: Creditors with Nonpriority Unsecured C	Claims		
Indianapoli	is IN	46216	— Last 4 digits of account number 3 6 2 6			
City	State	ZIP Code	_			

Debtor 1 Kimberly An	n Brow	/n	Case number (if known)				
Part 3: List Other	s to B	e Notified Abo	ut a Debt That \	∕ou Already	/ Lis	sted Continuation Page	
Professional Finance Co	ompan	у	On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name 5754 W. 11th St, Ste. 10	0		Line 4.31 of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims	
Number Street				,		Part 2: Creditors with Nonpriority Unsecured Claims	
			— — Last 4 digits of	account num	ber		
Greeley	СО	80634	_				
City	State	ZIP Code					
Resurgent Capital Servi	ices		On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name P.O. Box 10587			Line 4.8 of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims	
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims	
			 Last 4 digits of 	account num	ber		
Greenville	SC	29603-0587	<u>—</u>				
City	State	ZIP Code					
RiteMoney, Ltd.			On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name PO Box 41439			Line 4.25 of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims	
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims	
			— ast 4 digits of	account num	hor		
Houston	TX	77241-1439	— Last 4 digits of	account num	Dei		
City	State	ZIP Code	_				
RMP Services LLC			On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name 200 N New Rd			 line 430 of	(Check one):		Part 1: Creditors with Priority Unsecured Claims	
Number Street				(Gricon Gric):		Part 2: Creditors with Nonpriority Unsecured Claims	
			— — Last 4 digits of	account num	her	0 1 9 9	
Waco	TX	76710-6932	Last 4 digits of	account main		<u> </u>	
City	State	ZIP Code					
Speedy Cash			On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name Attn: Bankruptcy Dept.			Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims	
Number Street PO Box 780408			_		\checkmark	Part 2: Creditors with Nonpriority Unsecured Claims	
<u> </u>			 Last 4 digits of 	account num	ber		
Wichita City	KS State	67278-0408 ZIP Code	_				
Transworld Systems, In			On which entry	in Part 1 or P	art 2	2 did you list the original creditor?	
Name			_				
PO Box 17221 Number Street			Line <u>4.24</u> of	(Check one):	_	Part 1: Creditors with Priority Unsecured Claims	
			_			Part 2: Creditors with Nonpriority Unsecured Claims	
NACI una ima auto a sa	D-	40050	 Last 4 digits of 	account num	ber	5 3 9 7	
Wilmington City	DE State	19850 ZIP Code					

Debtor 1 Kim	berly Ann Brow	'n	Case number (if known)			
Part 3: Lis	st Others to B	Notified Ab	oout a Debt That You Already Listed Continuation Page			
U.S. Attorney			On which entry in Part 1 or Part 2 did you list the original creditor?			
Name Civil Process C	lerk-IRS		Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street 601 N.W. Loop	410, Suite 600		Part 2: Creditors with Nonpriority Unsecured Claims			
San Antonio City	TX State	78216 ZIP Code	Last 4 digits of account number			
West Law Grou	р		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name Attn: James We	est		Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number Street 957 Nasa Pkwy	, #503		Part 2: Creditors with Nonpriority Unsecured Claims			
	TX	77058	Last 4 digits of account number			
City	State	ZIP Code				

Debtor 1	Kimberly Ann Brown	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom runt r	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	\$33,702.47
	6j.	Total. Add lines 6f through 6i.	6j.	\$33,702.47

Fill in this in	formation to i	dentify your case:		
Debtor 1	Kimberly	Ann	Brown	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: WESTERN DIS	TRICT OF TEXAS	<u>s</u>
Case number				
(if known)				- ☐ Check if this is an amended filing
Official Form	106G			
		/ Contracts and	d Unevnired	Leases 12/15
	. Executor	Contracts and	d Offexpired	
No. Che ✓ Yes. Fil List separate is for (for ex	eck this box and fill in all of the infor	mation below even if the or company with who cle lease, cell phone).	urt with your other so e contracts or leases n you have the con	chedules. You have nothing else to report on this form. es are listed on Schedule A/B: Property (Official Form 106A/B). Intract or lease. Then state what each contract or lease es for this form in the instruction booklet for more examples of
Person o	r company with v	whom you have the co	ntract or lease	State what the contract or lease is for
	at the Park			Residential Lease
Name 16021 B	iltmore Ave			Began November 1, 2018 — Ends November 1, 2019
Number	Street			Contract to be ASSUMED
Pflugerv	rille	TX	78660	_
City		State	ZIP Code	
2.2 LB Woo	dlands, LLC			Residential Lease Date Lease Began: 2/10/2018
407 Rhe Number	toric Way Street			Date Scheduled to End: 3/31/2020
	Oli Get			Landlord holds a judgment against Debtor
Pflugerv	rille	тх	78660	Contract to be REJECTED Contract is in DEFAULT
City		State	ZIP Code	

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 49 of 100

ill in this info	ormation to i	dentify your case	:		
Debtor 1	Kimberly First Name	Ann Middle Name	Brown Last Name	_	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	r the: WESTERN DIS	STRICT OF TEXAS	_	
Case number (if known)					Check if

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	•	ou h No Yes	ave any codebtors?	(If you are filing a	joint case, de	o not list eithe	r spouse a	as a codebtor.)
2.		ide A	•			•	•	(Community property states and territories , Washington, and Wisconsin.)
	M		Did your spouse, form	ner spouse, or legal	l equivalent li	ve with you a	t the time?	
	V	. оо.	No	ioi opodoo, oi iogai	oquivaloni ii	vo mar you a		
		M	Yes					
		Ľ	In which community st	ate or territory did y	ou live? _	Texas	Fill i	in the name and current address of that person.
			Glenn Brown					
			Name of your spouse, form 111 Butler Lane	ner spouse, or legal eq	uivalent			
			Number Street					
			Elgin		TX	78621		
			City		State	ZIP Code		

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 50 of 100 $^{01/29/2019}\,_{05:04:28pm}$

F	ill in this inform	ation to identify	your case:					
	Debtor 1	Kimberly	Ann	Brown				
		First Name	Middle Name	Last Name			Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			$- _{\Box}$	An amended filing
	-			ISTRICT OF TEX	/ \ C			A supplement showing postpetition
	United States Bankru Case number	uptcy Court for the:	WESTERN	ISTRICT OF TEX	NAS_		- -	chapter 13 income as of the following date:
	(if known)				_			MM / DD / YYYY
0	fficial Form 10	<u>61</u>						
S	chedule I: You	ur Income						12/15
res inc ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ring correct information your your spouse. I more space is need	ation. If you are f you are separa ded, attach a se Answer every q	married and not a ted and your spo parate sheet to th	filing j use is	jointly, s not fil	and your ing with y	I Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
1.	Fill in your employ	yment						
	If you have more th	nan one		Debtor 1				Debtor 2 or non-filing spouse
	job, attach a separa	ate page Emplo	yment status	☑ Employed				Employed
	with information ab additional employe	rs.		☐ Not employe				☐ Not employed
		Occup	ation	Office Coordin	ator			
	Include part-time, s or self-employed w	l .	yer's name	PSN Affiliates				_
	Occupation may in student or homema applies.	Lilipio	yer's address	Number Street	ed Wa	y Ste	100	Number Street
				Grapevine City			76051 Zip Code	City State Zip Code
		How Io	ong employed th	ere? 6 mont	ns			
	Cive D	otoilo About Ma	mthly Incom	_				
		etails About Mo			ing to	roport f	or any lino	, write \$0 in the space. Include your
	n-filing spouse unless			i. II you nave noun	ing to	report	or arry line	, white 40 in the space. Include your
	ou or your non-filing on need more space, a			er, combine the info	ormatio	on for a	II employe	rs for that person on the lines below. If
						For De	btor 1	For Debtor 2 or non-filing spouse
2.		s wages, salary, ar . If not paid monthly			2.	\$4	1,391.83	
3.	Estimate and list I	monthly overtime p	ay.		3. +		\$0.00	
4.	Calculate gross in	ncome. Add line 2	+ line 3.		4.	\$4	1,391.83	

Official Form 106l Schedule I: Your Income page 1

Debti	Kimberiy Ann Brown		Case nu	nber (if k	(nown)		
		F	or Debtor 1		ebtor 2 or iling spouse		
	Copy line 4 here	4.	\$4,391.83			_	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$727.09				
	5b. Mandatory contributions for retirement plans	5b.	\$0.00				
	5c. Voluntary contributions for retirement plans	5c.	\$0.00				
	5d. Required repayments of retirement fund loans	5d.	\$0.00				
	5e. Insurance	5e.	\$314.60				
	5f. Domestic support obligations	5f.	\$0.00				
	5g. Union dues	5g.	\$0.00				
	5h. Other deductions. Specify:	5h. +	\$0.00				
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,041.69				
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,350.14				
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00				
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00				
	8e. Social Security	8e.	\$0.00				
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00				
	8g. Pension or retirement income	- 8g.	\$0.00				
	8h. Other monthly income.						
	Specify:	8h. +	\$0.00				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00			l	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,350.14	+		=_	\$3,350.14
11.	State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your housel			ır roomm	acton and oth	oor	
	friends or relatives.	ioia, you	ir dependents, you	ii roomii	iales, and oir	iei	
	Do not include any amounts already included in lines 2-10 or amounts that	at are no	t available to pay	expense	s listed in Scl	hedule	
	Specify:				11.	+_=	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11. income. Write that amount on the Summary of Your Assets and Liabilities if it applies.						\$3,350.14 mbined nthly income
13.	Do you expect an increase or decrease within the year after you file t	his forn	1?			0	,
	✓ No. None.						
	Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 52 of 100 $^{01/29/2019}\,_{05:04:29pm}$

F	ill in this inform	ation to identify	y your case:			Cha	ck if this	· ie·	
	Debtor 1	Kimberly First Name	Ann Middle Name	Brown Last Nan			An ame	ended filing lement showing r 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nar	me		•	ng date:	s or the
	United States Bankr	uptcy Court for the:	WESTERN DIST	TRICT OF 1	TEXAS		MM / D	D / YYYY	_
1	Case number (if known)						, 2	-,	
	ficial Form 10	 6J				J			
_	hedule J: Yo		;						12/15
cor	rect information. If ne and case numbe	more space is nee	ded, attach anotherer every question.	er sheet to th	ng together, both ai nis form. On the top				
1.	Is this a joint case	e?							
2.	_ No	ebtor 2 live in a sep			for Separate House	hold of	Debtor	2.	
	Do not list Debtor 2.	l and	Yes. Fill out this inf for each dependent.		Dependent's relati Debtor 1 or Debtor		o to	Dependent's age	Does dependent live with you?
	Do not state the de names.	ependents'							Yes No Yes No Yes No Yes No Yes No No No No
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						- ∏ Yes
Est to r	imate your expense	of a date after the b	uptcy filing date u	nless you ar	e using this form as supplemental Sche		-	•	
	lude expenses paid th assistance and h		-	-				Your expens	ses
4.		ne ownership exper age payments and a					4	4.	\$1,230.00
	If not included in	line 4:							
	4a. Real estate ta	ixes					4	4a	
	4b. Property, hom	neowner's, or renter's	sinsurance				4	4b	\$22.26
	4c. Home mainte	nance, repair, and u	pkeep expenses				4	4c	
	4d. Homeowner's	association or cond	ominium dues				4	4d.	

Deb	tor 1 Kimberly Ann Brown Case numb	er (if known)	
		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$110.00
	6b. Water, sewer, garbage collection	6b	\$40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$141.50
	6d. Other. Specify: Cell Phones	6d	\$100.00
7.	Food and housekeeping supplies	7.	\$500.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$50.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses (See continuation sheet(s) for details	s) 11	\$85.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$157.86
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 Car Payment	17a	\$660.08
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify: Conn's	17c	\$143.78
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	_ 19	

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 54 of 100 $^{01/29/2019}$ 05:04:29pm

Deb	otor 1	Kimberly Ann Brown	Case number (if known)	
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify:	21. +	
22.	Calcu	ulate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$3,590.48
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	J-2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,590.48
23.	Calcı	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$3,350.14
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$3,590.48
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$240.34)
24.	Do yo	ou expect an increase or decrease in your expenses within the year after	you file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your modern to the year of your modern to your modern to the year of your modern to your m	. ,	
	1	No.		_
		Yes. Explain here: None.		
		The state of the s		

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 55 of 100 $^{01/29/2019}\,_{05:04:29pm}$

Debtor 1	Kimberly Ann Brown	Case number (if known)	
11. <u>Medi</u>	cal and dental (details):		
Pres	criptions		\$70.00
Doct	or's Visit	_	\$15.00
		Total:	\$85.00

Debtor 1	Kimberly	Ann	Brown		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name		
Jnited States	Bankruptcy Court fo	r the: WESTERN D	ISTRICT OF TEXAS		
Case number (if known)				☐ Check if the amended	
Official Fo	rm 106Sum			•	
ummary	of Your Asse	ets and Liabili	ities and Certain Stat	istical Information	12/
chedules afte		inal forms, you must		n on this form. If you are filing a neck the box at the top of this pa	ge.
				- ·	our assets alue of what you owr
	A/B: Property (Officia				\$0.0
1a. Copy	line 55, Total real es	state, from Schedule	A/B		φυ.υ
1b. Сору	line 62, Total persor	nal property, from Sch	nedule A/B		\$17,955.2
4- 0	line 63, Total of all p	property on Schedule	A/B		\$17,955.2
тс. Сору					
	Summarize You	r Liabilities			
	Summarize You	r Liabilities			Your liabilities Amount you owe
Part 2:	D: Creditors Who Ha	ave Claims Secured b	by <i>Property</i> (Official Form 106D) of claim, at the bottom of the last		Amount you owe
Schedule 2a. Copy Schedule	D: Creditors Who Ha the total you listed in E/F: Creditors Who F	ave Claims Secured b n Column A, Amount Have Unsecured Clair	of claim, at the bottom of the last ms (Official Form 106E/F)		\$24,569.6
Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Ha the total you listed in E/F: Creditors Who F the total claims from	ave Claims Secured b n Column A, Amount Have Unsecured Clain n Part 1 (priority unsec	of claim, at the bottom of the last ms (Official Form 106E/F)	page of Part 1 of Schedule D	\$24,569.6 \$0.0
Schedule 2a. Copy Schedule 3a. Copy	D: Creditors Who Ha the total you listed in E/F: Creditors Who F the total claims from	ave Claims Secured b n Column A, Amount Have Unsecured Clain n Part 1 (priority unsec	of claim, at the bottom of the last ms (Official Form 106E/F) cured claims) from line 6e of Sche	page of Part 1 of Schedule D	\$24,569.6

Official Form 106Sum

Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22c of Schedule J.....

\$3,350.14

\$3,590.48

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 57 of 100 $^{01/29/2019}\,_{05:04:29pm}$

De	btor 1	Kimberly Ann Brown	Case number (if known)	_
i	art 4:	Answer These Questions for Administrative and Statis	stical Records	_
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No ✓ Ye	 You have nothing to report on this part of the form. Check this box and es 	d submit this form to the court with your other schedules.	
7.	What k	ind of debt do you have?		
	لظا	our debts are primarily consumer debts. Consumer debts are those "incimily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for sta		
		our debts are not primarily consumer debts. You have nothing to report is form to the court with your other schedules.	rt on this part of the form. Check this box and submit	
8.		he Statement of Your Current Monthly Income: Copy your total current Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14	*	
9.	Copy th	he following special categories of claims from Part 4, line 6 of Schedu	ule E/F:	
			Total claim	
	From P	Part 4 on Schedule F/F, copy the following:		

110	in rait 4 on Schedule Lit, copy the following.		
9a.	Domestic support obligations. (Copy line 6a.)	_	\$0.00
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	_	\$0.00
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	_	\$0.00
9d.	Student loans. (Copy line 6f.)	_	\$0.00
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	_	\$0.00
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+_	\$0.00
9g.	Total. Add lines 9a through 9f.		\$0.00

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 58 of 100 $^{01/29/2019}\,_{05:04:29pm}$

Fill in this info	ormation to id	lentify your case:		
Debtor 1	Kimberly First Name	Ann Middle Name	Brown Last Name	_
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
		the: WESTERN DIS	TDICT OF TEVAS	
	ikrupicy Court for	tile. WESTERN DIS	TRICT OF TEXAS	_
Case number (if known)				☐ Check if this is an amended filing
Official Form	106Dec			
Declaration	About an Ir	ndividual Debt	or's Schedules	12/15
concealing proper \$250,000, or impri	ty, or obtaining r	money or property by		dules. Making a false statement, a bankruptcy case can result in fines up to 9, and 3571.
Did you pay o	or agree to pay so	omeone who is NOT	an attorney to help you fill	out bankruptcy forms?
☑ No				
Yes. Na	me of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty true and corre		clare that I have read	the summary and schedule	es filed with this declaration and that they are

Signature of Debtor 2

MM / DD / YYYY

Date

X /s/ Kimberly Ann Brown

Date <u>01/29/2019</u>

Kimberly Ann Brown, Debtor 1

MM / DD / YYYY

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 59 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Debtor 1	Kimberly	Ann	Brown						
	First Name	Middle Nam	e Last Nam	Э					
Debtor 2 (Spouse, if filing)	First Name	Middle Nam	e Last Nam						
United Ctates Do	alementare Count for	tha WESTER	N DISTRICT OF	TEV A C					
	nkrupicy Court for	the: VVESTER	N DISTRICT OF	IEXAS					
Case number (if known)							Check if amende	this is ar d filing	1
Official Form	107				_				
Statement o	f Financial	Affairs for	r Individuals	Filing for B	ankrupt	су			04/1
correct information your name and ca	on. If more space se number (if kn	e is needed, att own). Answer	married people are ach a separate she every question.	et to this form.(On the top of	any addit			•
Part 1: Giv I. What is your Married Not marrie During the la	n. If more spaces number (if known per Details About the Details A	e is needed, att own). Answer out Your Mar status?	ach a separate she every question. Ital Status and here other than where	et to this form. (Where You Li ere you live now	ved Befor	any addit			
Part 1: Given the control of the con	n. If more spaces number (if known per Details About the Details A	e is needed, att own). Answer out Your Mar status?	ach a separate she every question. ital Status and	et to this form. (Where You Li ere you live now	ved Befor	any addit		ges, write	Debtor 2
Part 1: Giv What is your Married Not married During the la Yes. List	n. If more spaces number (if known per Details About the Details A	e is needed, att own). Answer out Your Mar status?	ach a separate she every question. Ital Status and here other than whast 3 years. Do not Dates Debtor 1	where You Li ere you live now include where you Debtor 2:	ved Befor	any addit		pes, write Dates lived	Debtor 2
Part 1: Giv Not married Not married During the la Yes. List	n. If more spaces number (if known per petails About the petails About the petails and pet	e is needed, att own). Answer out Your Mar status?	ach a separate she every question. Ital Status and here other than whast 3 years. Do not Dates Debtor 1	where You Li ere you live now include where you Debtor 2:	ved Befor ?	any addit		pes, write Dates lived	: Debtor 2 there
Part 1: Giv Not married No During the la No Ves. List Debtor 1:	n. If more spaces number (if known per petails About the petails About the petails and pet	e is needed, att own). Answer out Your Mar status?	here other than whast 3 years. Do not Dates Debtor 1 lived there	ere you live now include where you Debtor 2:	ved Befor ?	any addit		Dates lived	: Debtor 2 there
Part 1: Giv I. What is your Married Not marrie During the la No Yes. List Debtor 1: 407 Rhet	on. If more space se number (if known per current marital sed st 3 years, have all of the places years)	e is needed, attown). Answer out Your Mar status? you lived anyw you lived in the I	here other than whast 3 years. Do not Dates Debtor 1 lived there	ere you live now include where you Debtor 2:	ved Befor ? u live now. as Debtor 1	any addit		Dates lived	: Debtor 2 there

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 60 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Debtor 1	Kimberly Ann Brown	Case number (if known)					
Part 2:	Explain the Sources of Y	our Income					
I. Did yo Fill in t	tu have any income from employn the total amount of income you rece are filing a joint case and you have	nent or from operating a b	sinesses, including par	t-time activities.	lendar years?		
□ No ☑ Ye	es. Fill in the details.						
		Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions		
	ary 1 of the current year until u filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$4,389.44	Wages, commissions, bonuses, tips☐ Operating a business			
		Operating a business		Operating a business			
	t calendar year:		\$41,673.00	Wages, commissions, bonuses, tips			
January i i	to December 31,	Operating a business		Operating a business			
	endar year before that:	₩ Wages, commissions, bonuses, tips	\$46,409.00	☐ Wages, commissions, bonuses, tips			
January 1 t	to December 31, 2017)	Operating a business		Operating a business			
Include unemp and ga Debtor	e income regardless of whether that alloyment; and other public benefit publing and lottery winnings. If you allow the source and the gross income from the source and the gross income from the prosest income from the gross income ground the ground the ground the gross income ground the ground the ground the ground the gross income ground the gr	income is taxable. Example ayments; pensions; rental in are in a joint case and you	les of other income are acome; interest; dividen have income that you re	ds; money collected from la eceived together, list it only	wsuits; royalties;		
□ No	•	m cach source separately.	Do not morade moone	that you listed in line 4.			
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions		
	ary 1 of the current year until u filed for bankruptcy:						
or the last	t calendar year:						
January 1 t	to December 31, 2018)						
or the cale	endar year before that:	Cancelled Debt Incom		_			
	to December 31, 2017)	Pension	\$515.00				

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 61 of 100 $^{01/29/2019\ 05:04:30pm}$

Debtor 1 Kimberly Ann Brown		Case number (if known)								
Part 3:	List Certain Payments You Ma	ide Before \	You Filed for Ba	nkruptcy						
6. Are e	ither Debtor 1's or Debtor 2's debts prima	Provided the second sec								
□и										
	During the 90 days before you filed for	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?								
	No. Go to line 7.	□ No. Go to line 7.								
	Yes. List below each creditor to what total amount you paid that crechild support and alimony. A	editor. Do not i	nclude payments for	domestic support of	oligations, such as					
	* Subject to adjustment on 4/01/19 and	d every 3 years	after that for cases	filed on or after the o	date of adjustment.					
V Y	Debtor 1 or Debtor 2 or both have primarily consumer debts.									
	During the 90 days before you filed for	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
	No. Go to line 7.									
	Yes. List below each creditor to who creditor. Do not include payment Also, do not include payment	nents for dome	stic support obligation	ons, such as child su						
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for					
	al Credit Union	_	\$1,982.40	\$21,390.30	_ Mortgage					
Creditor's na 15108 FM		monthly @	§ \$660.80							
Number Street		_			Loan repayment Suppliers or vendors					
Pflugervi City	Ile TX 78660 State ZIP Code	_			Other					
Inside corpo agent	n 1 year before you filed for bankruptcy, or include your relatives; any general partnerations of which you are an officer, director, including one for a business you operate a as child support and alimony.	ers; relatives of person in cont	f any general partner rol, or owner of 20%	rs; partnerships of whor more of their votin	nich you are a general partner; ng securities; and any managing					
	es. List all payments to an insider.									

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 62 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Deb	otor 1	Kimberly Ann Brown		Case num	ber (if known) _			
8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debenefited an insider?								
	Include	payments on debts guarar	nteed or cosigned by an insider.					
	▼ No □ Yes	s. List all payments that be	nefited an insider.					
P	art 4:	Identify Legal Acti	ons, Repossessions, and Forecl	osures				
9.	List all	•	r bankruptcy, were you a party in any la sonal injury cases, small claims actions, c es.			-	-	
	□ No ☑ Yes	s. Fill in the details.						
	e title		Nature of the case	Court or agend	•		tus of the case	
		s, LLC d/b/a Speedy (imberly Ann Brown	Civil Suit on Debt Status or Disposition: Judgment	Justice Cour Precinct 3	t of Travis Co	ounty,	Pending	
Cas	511 VS. N	aniberry Ann Brown	Status of Disposition. Judgment	Court Name			_	
Cas	e numbe	J3-CV-18-066795		Number Street			Concluded	
				Austin	TX	78701	_	
				City	State	ZIP Code	_	
10.	seized,	1 year before you filed for or levied? all that apply and fill in the	r bankruptcy, was any of your property details below.	repossessed, for	eclosed, garni	shed, attached	d,	
	_	Go to line 11. s. Fill in the information be	low.					
11.		•	or bankruptcy, did any creditor, includi refuse to make a payment because you	•	ncial institutior	n, set off any		
	✓ No ☐ Yes	s. Fill in the details.						
12.		•	r bankruptcy, was any of your property eiver, a custodian, or another official?	in the possession	n of an assigne	ee for the bene	efit of	
	☑ No □ Yes	3						

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 63 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Deb	otor 1	Kimberly Ann B	rown	Ca	ase number (if k	nown)	
P	art 5:	List Certain (Gifts and Co	ntributions			
13.	Within	2 years before yoι	ı filed for bankı	ruptcy, did you give any gifts with a total	value of more	than \$600 per perso	on?
	✓ No ☐ Yes	s. Fill in the details	for each gift.				
14.		2 years before you charity?	ı filed for bankı	ruptcy, did you give any gifts or contribut	tions with a tota	al value of more tha	ın \$600
	✓ No	s. Fill in the details	for each gift or o	contribution.			
P	art 6:	List Certain I	_osses				
15.		1 year before you isaster, or gambli		ıptcy or since you filed for bankruptcy, di	id you lose any	thing because of th	neft, fire,
	☑ No □ Yes	s. Fill in the details.					
Р	art 7:	List Certain I	Payments or	Transfers			
10.	anyone Include	you consulted ab	out seeking ba	Iptcy, did you or anyone else acting on your interpretation or preparing a bankruptcy petit preparers, or credit counseling agencies for	tion?		
				Description and value of any property	transferred	Date payment	Amount of
	N Office	s of Douglas J. I /as Paid	Powell, P.C.	_		or transfer was made	payment
		0th Street				01/14/2019	\$750.00
Num	nber Str	eet		_		1/29/2019	\$300.00
Aus City	stin	TX State	78701 ZIP Code	_			
Ema	il or websit	e address		_			
Pers	on Who M	lade the Payment, if No	ot You	_			
17.	anyone	who promised to	help you deal v	uptcy, did you or anyone else acting on yowith your creditors or to make payments it you listed on line 16.			perty to
	✓ No ☐ Yes	s. Fill in the details.					

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 64 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Deb	tor 1	Kimberly Ann Bro	own		Case number (it	known)				
18.		Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?								
		· ·		made as security (such as grave already listed on this state	•	st or mortgage on you	r property).			
	✓ No	s. Fill in the details.								
19.		e a beneficiary? (T		ruptcy, did you transfer any called asset-protection device		trust or similar devi	ce of which			
	Ye	s. Fill in the details.								
Pa	art 8:	List Certain Fir	nancial Acc	ounts, Instruments, Sa	ife Deposit Boxes, ai	nd Storage Units				
? 0.	benefit Include	t, closed, sold, moved checking, savings, m	d, or transferro	otcy, were any financial accord? or other financial accounts; ce ciations, and other financial in	rtificates of deposit; shares	•	•			
	□ No ☑ Yes	s. Fill in the details.								
•	F adasa	I Consilie Union		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
		I Credit Union ncial Institution			Charling	0/20/2019	\$0.00			
150 Num	ber Sti	reet		XXXX- <u>3 4 4 4</u>	✓ Checking✓ Savings✓ Money market✓ Brokerage✓ Other	9/20/2018				
Pflu City	ugervill	e TX State	78660 ZIP Code		_					
21.	-	curities, cash, or othe		1 year before you filed for b	oankruptcy, any safe depo	osit box or other dep	oository			
	سخا	s. Fill in the details.								
22.	✓ No		n a storage un	it or place other than your h	ome within 1 year before	you filed for bankru	iptcy?			

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 65 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Deb	tor 1	Kimberly Ann Brown Case number (if known)
P	art 9:	Identify Property You Hold or Control for Someone Else
23.	•	hold or control any property that someone else owns? Include any property you borrowed from, are storing for, in trust for someone.
	✓ No ☐ Yes	. Fill in the details.
Pa	art 10:	Give Details About Environmental Information
or	the purp	ose of Part 10, the following definitions apply:
ł	nazardou	nental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of is or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, statutes or regulations controlling the cleanup of these substances, wastes, or material.
		ns any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites.
		us material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic e, hazardous material, pollutant, contaminant, or similar item.
₹ер	ort all no	otices, releases, and proceedings that you know about, regardless of when they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.
25.	☑ No	ou notified any governmental unit of any release of hazardous material?
26	ш	. Fill in the details.
-0.	orders.	and and and and and an analysis of the state
	✓ No ☐ Yes	. Fill in the details.

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 66 of 100 $^{01/29/2019\ 05:04:30pm}$

Deb	otor 1	Kimberly Ann Brown	Case number (if known)			
Р	art 11:	Give Details About Your Business or Connections to Ar	ny Business			
27.	. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					
		A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation				
	ست	None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each business				
28.		years before you filed for bankruptcy, did you give a financial statem cial institutions, creditors, or other parties.	ent to anyone about your business? Include			
	□ No □ Yes	. Fill in the details below.				

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 67 of 100 $^{01/29/2019}\,_{05:04:30pm}$

Debtor 1	Kimberly Ann Brown	Case number (if known)
Part 12	Sign Below	
that answer	ers are true and correct. I under	Financial Affairs and any attachments, and I declare under penalty of perjury and that making a false statement, concealing property, or obtaining money or aptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, 71.
X /s/ Kin	nberly Ann Brown	X
Kimber	ly Ann Brown, Debtor 1	Signature of Debtor 2
Date _	01/29/2019	Date
Did you at	tach additional pages to Your St	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who	not an attorney to help you fill out bankruptcy forms?
√ No		
	Name of person	Attach the Bankruptcy Petition Preparer's Notice,

Debtor 1 Kimberly Ann Brown First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS	Fill in this information to identify your case:							
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS	Debtor 1							
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS								
· ·	· · · · · · · · · · · · · · · · · · ·							
	United States Bar Case number	nkruptcy Court to	r the: WESTERN DIS	STRICT OF TEXAS				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?			Did you claim the property as exempt on Schedule C?		
Creditor's name:	A+ Federal Credit Union		Surrender the property. Retain the property and redeem it.		No Yes		
Description of property securing debt:	2012 Dodge Charger RT and Savings account		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:				
Creditor's name:	A+Federal Credit Union		Surrender the property. Retain the property and redeem it.		No Yes		
Description of property securing debt:	2012 Dodge Charger RT and Savings account		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debtor will continue making payareaffirming.	nent	ts to creditor without		

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 69 of 100 $^{01/29/2019}$ 05:04:31pm

Debtor 1 Kiml	berly Ar	nn Brown		Case number (if known)		
Identify the c	reditor a	and the property that is collateral		at do you intend to do with the perty that secures a debt?		you claim the property exempt on Schedule C?
Creditor's name: Description of property securing debt	f 2012 acco	ederal Credit Union Dodge Charger RT and Savin unt	□ □ ngs □	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debtor will continue making pareaffirming.	□ ☑ ymen	No Yes ts to creditor without
Creditor's name: Description of property securing debt	f Was	n Appliances, Inc. d/b/a Conn's her & Dryer	s 🗆 🗹	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		No Yes
For any unexpired fill in the informat yet ended. You m	d person tion belo nay assu ur unexp e:	w. Do not list real estate leases.	n Schedule Unexpired	e G: Executory Contracts and Unexpitates are leases that are still in effect the trustee does not assume it. 11 U	ect; th .S.C. : Will t	e lease period has not
Lessor's name Description of property:		LB Woodlands, LLC Residential Lease Date Lease Began: 2/10/2018 Date Scheduled to End: 3/31/ Landlord holds a judgment a	/2020	btor		No Yes
Under penalty			•	on about any property of my estate th	at sec	cures a debt and
X /s/ Kimberly Ann B Date 01/29/20 MM / DD	8rown, De 019	ebtor 1 Sig	ate	Debtor 2		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

ın	re Kimberiy Ann Brown	Case No.
		Chapter <u>7</u>
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert that compensation paid to me within one year before the filing of t services rendered or to be rendered on behalf of the debtor(s) in is as follows:	the petition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$1,500.00
	Prior to the filing of this statement I have received	
	Balance Due	\$450.00
2.	The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)	
3.	The source of compensation to be paid to me is:	
	✓ Debtor Other (specify)	
4.	☑ I have not agreed to share the above-disclosed compensation associates of my law firm.	on with any other person unless they are members and
	I have agreed to share the above-disclosed compensation w associates of my law firm. A copy of the agreement, togethe compensation, is attached.	
5.	In return for the above-disclosed fee, I have agreed to render leg-	al service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;	ce to the debtor in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of	f affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and co	onfirmation hearing, and any adjourned hearings thereof;

B2030 (Form	2030)	(12/15)
-------------	-------	---------

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/29/2019 /s/ Douglas J. Powell

Date Douglas J. Powell Bar No. 16194900

The Law Offices of Douglas J. Powell, P.C.

820 West 10th Street Austin, TX 78701

Phone: (512) 476-2457 / Fax: (512) 477-4503

/s/ Kimberly Ann Brown

Kimberly Ann Brown

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 76 of 100

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Kimberly Ann Brown CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor hereby verifies that the	attached	list of creditors is true and correct to the best of his/her
know	edge.		
Date .	1/29/2019	Signature	/s/ Kimberly Ann Brown
		J	Kimberly Ann Brown

A+ Federal Credit Union 6420 US Highway 290 East Austin, TX 78723

A+Federal Credit Union 15108 FM1825 Pflugerville, TX 78660

Ace Cash Express Collections Department 1231 Greenway Dr., Suite 700 Irving, TX 75038-2511

Ad Astra Recovery Services, Inc. 7330 W. 33rd St. N., Suite 118 Wichita, KS 67205-9370

Advance America PO Box 3058 Spartanburg, SC 29304-3058

Advance America(NCP Finance) 205 Sugar Camp Circle Dayton, OH 45409

American Medical Collection Agency 4 Westchester Plaza, Building 4 Elmsford, NY 10523

Approved Money Center 2604 West Pecan St, Ste B Pflugerville, TX 78660

ARA Imaging PO Box 4099 Austin, TX 78765-4099 Aspen Peak Financial

Atlas Credit Co 1701 South Mays Ste K&L Round Rock, TX 78664

Atlas Credit Co., Inc. 2210 W. Grande Blvd. Tyler, TX 75703-0554

Balance Credit PO Box 4356 Houston, TX 77210

Capital One Bank USA PO Box 30281 Salt Lake City, UT 84130-0281

CashNetUSA.com 200 W. Jackson Blvd., 4th Flr. Chicago, IL 60606-6941

Check N Go 7755 Montgomery Rd Cincinnati, OH 45236

Check N Go (Integrity Funding) 84 Villa Rd Greenville, SC 29615

Clinical Pathology Laboratories, Inc. PO Box 141669 Austin, TX 78714-1669 Conn Appliances, Inc. d/b/a Conn's Attn: Legal Department PO Box 2358 Beaumont, TX 77704

Credit Control, LLC PO Box 546 Hazelwood, MO 63042

Credit First National Assoc. PO Box 81344 Cleveland, OH 44188

Credit Management, LP 4200 International Pkwy. Carrolton, TX 75007-1912

CTRMA Processing PO Box 16777 Austin, TX 78761

Emoney (TMBTX Financial) 6917 Tomahawk Rd Ste 8162 Prairie Village, KS 66208

eMoney Missouri, LLC 8700 State Line Rd Ste 350 Leawood, KS 66206

First Premier Bank 3820 N Louise Ave. Sioux Falls, SD 57107-0145

G.L.A. Collection Company 2630 Gleeson Lane Louisville, KY 40299 Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

IRS Insolvency Office 300 E. 8th St. Mail Stop 5026AUS Austin, TX 78701

Ivy Funding Eight, LLC 22 W Bryan St Ste 208 Savannah, GA 31401

LB Woodlands, LLC 407 Rhetoric Way Pflugerville, TX 78660

Lend Up (Flurish Inc.) 225 Bush Street 11th floor San Francisco, CA 94104

Longhorn Emergency 8902 Otis Ave, Ste 103A Indianapolis, IN 46216

Longhorn Emergency Medical PO Box 638761 Cincinnati, OH 45263-8761

LVNV Funding, LLC PO Box 1269 Greenville, SC 29602

Majestic Lake Financial 635 Hwy 20, K Upper Lake, CA 95485 Merchants & Professional Credit Bureau PO Box 140675 Austin, TX 78714-0675

Millennium Loan Fund, LLC 4600 New Linden Road Wilmington, DE 19808

Mobile Loans PO Box 1409 Macksville, LA 71351

Money Key 3422 Old Capital Trail Ste 1613 Wilmington, DE 19808

My Payday Loan 2599 S. San Jacinto Ave San Jacinto, CA 92583

National Credit Adjusters 327 W. 4th Ave. Hutchinson, KS 67501

NAU Urology Specialists PO Box 14000 Belfast, ME 04915

Phoenix Financial Services, LLC 8902 Otis Ave, Suite 103A Indianapolis, IN 46216

Power Finance Texas 9595 Six Pines Dr, Ste 8210 The Woodlands, TX 77380 Professional Finance Company 5754 W. 11th St, Ste. 100 Greeley, CO 80634

Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603-0587

RiteMoney, Ltd. PO Box 41439 Houston, TX 77241-1439

RMP Services LLC 200 N New Rd Waco, TX 76710-6932

Speedy Cash Attn: Bankruptcy Dept. PO Box 780408 Wichita, KS 67278-0408

St. David's Heart & Vascular, PLLC PO Box 668 Brentwood, TN 37024-0668

Sun Loan Company 1736 N. Mays St. Round Rock, TX 78664-2915

Synchrony Bank/Care Credit Attn: Bankruptcy Dept. PO Box 965036 Orlando, FL 32896-5036

Texas Acceptance (Millenium Loan Fund) 750 New Orleans St, 2nd Floor Chicago, IL 60654 Texas Oncology Corporate Office 12221 Merit Dr Ste 500 Dallas, TX 75251

Touchstone Imaging PO Box 102107 Atlanta, GA 30368-2107

Transworld Systems, Inc. PO Box 17221 Wilmington, DE 19850

TxTag Customer Service Center 12719 Burnet Rd. Austin, TX 78727

U.S. Attorney Civil Process Clerk-IRS 601 N.W. Loop 410, Suite 600 San Antonio, TX 78216

United States Department of Justice United States Attorney 601 N.W. Loop 410, Suite 600 San Antonio, TX 78216

United States Trustee 903 San Jacinto, Suite 230 Austin, TX 78701

WebBank/Fingerhut 6520 Ridgewood Rd. Saint Cloud, MN 56303

West Law Group Attn: James West 957 Nasa Pkwy, #503 Houston, TX 77058 World Acceptance Corp. Attn: Bankruptcy Processing PO Box 6429 Greenville, SC 29606-6429

World Finance Corporation PO Box 6429 Greenville, SC 29606-6429 19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 85 of 100 $^{01/29/2019}\,_{05:04:33pm}$

F	ill in this <u>in</u>	formation to i	dentify your case	:		e box only as dire	
	ebtor 1	Kimberly	Ann	Brown	form and	in Form 122A-1Sı	ipb:
		First Name	Middle Name	Last Name	1. There is	no presumption of abu	ise.
	ebtor 2 Spouse, if filing	j) First Name	Middle Name	Last Name	of abuse	ulation to determine if applies will be made ulest Calculation (Official)	under Chapter 7
U	nited States B	ankruptcy Court fo	r the: WESTERN DIS	STRICT OF TEXAS		ns Test does not apply	,
	ase number known)					ed military service but	
					Check if t	his is an amended filir	g
Of	ficial Forn	n 122A-1					
Cł	napter 7 S	Statement o	f Your Current	Monthly Income			12/15
info are mili 122	ormation appl exempted fro itary service, !A-1Supp) wit	ies. On the top oom a presumption complete and file h this form.	f any additional pages of abuse because yo	neet to this form. Include the source with the sour name and case of the source of the	e number (if know) nsumer debts or b	n). If you believe that ecause of qualifying	you
1.			g status? Check one o				
	-		_	nny.			
	_	rried. Fill out Colu			" 0.44		
	_			Il out both Columns A and B,			
				ou. You and your spouse ar			
	Liv	ving in the same h	nousehold and are no	t legally separated. Fill out b	ooth Columns A and	d B, lines 2-11.	
	de	clare under penalt	y of perjury that you an	 Fill out Column A, lines 2-1 d your spouse are legally seps that do not include evading 	parated under nonb	ankruptcy law that app	lies or that you
	bankruptcy August 31. I in the result.	case. 11 U.S.C. of the amount of you not include an	§ 101(10A). For exampur monthly income varing income amount more	ed from all sources, derived ole, if you are filing on Septen ed during the 6 months, add e than once. For example, if I have nothing to report for any	nber 15, the 6-mon the income for all 6 both spouses own t	th period would be Mai months and divide the he same rental proper	ch 1 through total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	wages, salary, tip ayroll deductions).	s, bonuses, overtime	, and commissions	\$4,121.05		
3.	Alimony and if Column B	•	yments. Do not includ	de payments from a spouse	\$0.00		
4.	expenses of regular contr your depend	f you or your depositions from an uents, parents, and	roommates. Include re		\$0.00		

Deb	tor 1	Kimberly Ann Brown			c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	•
5.	Net inc	ome from operating a busine	ess, profession, or	farm				
			Debtor 1	Debtor 2				
	Gross re	eceipts (before all ons)	\$0.00					
	Ordinary expense	y and necessary operating —es	\$0.00 -		Сору			
		nthly income from a business, ion, or farm	\$0.00		here →	\$0.00		
6.	Net ince	ome from rental and other re						
			Debtor 1	Debtor 2				
	Gross re	eceipts (before all ons)	\$0.00					
	Ordinary expense	y and necessary operating —es	\$0.00 -		Сору			
		nthly income from rental or all property	\$0.00		here →	\$0.00		
7.	Interest	t, dividends, and royalties				\$0.00		
8.	Unemp	loyment compensation				\$0.00		
		enter the amount if you contenunder the Social Security Act.						
	Fory	you		\$0.	00_			
	For	your spouse						
9.		n or retirement income. Do renefit under the Social Securit		unt received that		\$0.00		
10.	amount or paym or interr	from all other sources not line. Do not include any benefits and the section of a s	received under the war crime, a crime If necessary, list o	Social Security A against humanity	ct ′,			
	Total an	nounts from separate pages, i	f any.		+		+	
11.	Add line	te your total current monthly es 2 through 10 for each colum dd the total for Column A to the	nn.			\$4,121.05	+	= \$4,121.05 Total current
								monthly income

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 87 of 100 $^{01/29/2019}\,_{05:04:33pm}$

Debtor 1		K	imberly Ann Brown		Case number (if known)		
Ρ	art 2:		Determine Whether the Means	Test Applies to You			
12.	Calc	ulate	your current monthly income for the y	ear. Follow these steps:			
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here 😝 12a. \$4,121.05		
		Mul	tiply by 12 (the number of months in a ye	ar).	X 12		
	12b.	The	e result is your annual income for this part	t of the form.	12b. \$49,452.60		
13.	Calc	ulate	the median family income that applies	to you. Follow these steps:			
	Fill in	the s	state in which you live.	Texas			
	Fill in	the r	number of people in your household.	1			
	Fill in	the r	median family income for your state and s	size of household	13. \$48,948.00		
			ist of applicable median income amounts is for this form. This list may also be ava		•		
14.	How	do th	ne lines compare?				
	14a.		Line 12b is less than or equal to line 13 Go to Part 3.	. On the top of page 1, check b	oox 1, There is no presumption of abuse.		
	14b.	$\overline{\mathbf{V}}$	Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.		
Р	art 3:		Sign Below				
	By	signir	ng here. I declare under penalty of perjury	/ that the information on this sta	stement and in any attachments is true and correct.		
	Í	Ū			,		
			imberly Ann Brown erly Ann Brown, Debtor 1	X	ature of Debtor 2		
			ony : 2.0, 200.0	J.g.n.			
		Date _.	1/29/2019 MM / DD / YYYY	Date	MM / DD / YYYY		
	.,		MIM / DD / YYYY	4004.0	MINI/UU/IIIY		

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fil	l in	this inf	ormation to i	dentify your case:				neck the appropriate box as directed	
Del	btor 1		Kimberly	Ann	Brown		in	lines 40 or 42:	
Dol	btor 2)	First Name	Middle Name	Last Name	е	1 1	cording to the calculation required by this atement:	
			First Name	Middle Name	Last Name	e		1. There is no presumption of abuse.	
Uni	ited S	States Ba	nkruptcy Court fo	r the: WESTERN DIS	TRICT OF	TEXAS	. _	2. There is a presumption of abuse.	
		mber						2. There is a presumption of abuse.	
(if k	knowi	า)						Check if this is an amended filing	
Offi	ioio	LEorm	122A-2						
				Calculation				04	/16
122A Be a accu infor	A-1). s coi irate. mati	mplete ar If more on applie	nd accurate as p space is needed es. On the top o	ossible. If two marrie I, attach a separate sh f any additional pages	ed people are neet to this fo	e filing together, orm. Include the	both ar	rent Monthly Income (Official Form re equally responsible for being umber to which the additional r (if known).	
Pa	rt 1:	Det	termine Your	Adjusted Income					
1.	Copy	your to	tal current mont	hly income	Copy line	e 11 from Officia	al Form	122A-1 here	15
2.	Did y	ou fill o	ut Column B in F	Part 1 of Form 122A-13	?				
	$\overline{\mathbf{Q}}$	No. Fill i	n \$0 for the total	on line 3.					
		Yes. Is y	our spouse filing	with you?					
	_	□ No.	Go to line 3.						
		☐ Yes	. Fill in \$0 for the	e total on line 3.					
		st your o	current monthly	income by subtracting ou or your dependent			ncome	not used to pay for	
				122A-1, was any amoui you or your dependents		me you reported	for your	spouse NOT regularly used	
		No. Fill i	n \$0 for the total	on line 3.					
		Yes. Fill	in the information	n below:					
		State ea	ch purpose for v	which the income was	used	Pill in the case			
			support people	s used to pay your spo other than you or your	use's tax	Fill in the amo are subtracting your spouse's	g from		
	-								
	Т	otal				+	\$0.00	Copy.total.here →\$0.0	0_
4.	Adiu	st vour d	current monthly	income. Subtract the to	otal on line 3	from line 1.		\$4,121.0)5

Debto	r 1	Kimberly Ann Brown		Case nu	mber (if known)	
Par	t 2:	Calculate Your Deductions from You	ur Income			
these	amo fied i	nal Revenue Service (IRS) issues National and Lo bunts to answer the questions in lines 6-15. To fi in the separate instructions for this form. This in ice.	ind the IRS stand	lards, go online ι	using the link	
use so from y	ome o	e expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the spouse's income in line 3 and do not deduct any operm 122A-1.	standards. Do not	t deduct any amou	unts that you subtracted	
If you	exp	enses differ from month to month, enter the average	e expense.			
When	ever	this part of the form refers to you, it means both you	u and your spouse	e if Column B of F	form 122A-1 is filled in.	
5.	The	number of people used in determining your ded	uctions from inc	ome		
	retu	in the number of people who could be claimed as extrn, plus the number of any additional dependents with different from the number of people in your househo	hom you support.		I I	
Nati	onal	Standards You must use the IRS National St	andards to answe	er the questions in	lines 6-7.	
6.		nd, clothing and other items: Using the number of the dollar amount for food, clothing, and other item		ed in line 5 and the	e IRS National Standards,	\$647.00
7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.						
	Pe	eople who are under 65 years of age				
	7a.	Out-of-pocket health care allowance per person	\$52.00			
	7b.	Number of people who are under 65	x1			
	7c.	Subtotal. Multiply line 7a by line 7b.	\$52.00	Copy here →	<u>\$52.00</u>	
	Pe	eople who are 65 years of age or older				
	7d.	Out-of-pocket health care allowance per person	\$114.00			
	7e.	Number of people who are 65 or older	x			
	7f.	Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here -> -	\$ 0.00	
	7g.	Total. Add lines 7c and 7f			Copy total here → 7g.	\$52.00

fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment \$0.00 Repeat this amount on line 33a. 9c. Net mortgage or rent expense.	Debtor 1	Kimberly A	Ann Brown		Case number (if known)	
In Housing and utilities – Insurance and operating expenses In Housing and utilities – Insurance and operating expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities – Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities – Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment sound for the lifts amount in line 3a. 9c. Net mortgage or rent expenses. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than 90, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. □ 1. Go to line 14. □ 1. Go to line 14.	Local Sta	andards	You must use the IRS Local Sta	ndards to answer the ques	tions in lines 8-15.	
To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities Mortgage or rent expenses: 9. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 11. Coc to line 14.			•	ogram has divided the IR	S Local Standard for housing	
To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment \$0.00 here \$\rightarrow\$ \$0.00 line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or substitution of the substitution of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.		•		enses		
Available at the bankruptcy clerk's office. 8. Housing and utilities – Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities – Mortgage or rent expenses. 9. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment So.00 here \$0.00 here \$1,268.00	To answ	er the question	ns in lines 8-9, use the U.S. Trust	ee Program chart.		
9. Housing and utilities — Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment **So.00** Repeat this amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 11. Go to line 14.				eparate instructions for this	s form. This chart may also be	
9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment \$0.00 Copy \$0.00 Repeat this amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain Why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.		_		-		\$489.00
for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment So.00 here Total average monthly payment For amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.	9. Hou	sing and utilit	ies Mortgage or rent expenses:	<u>:</u>		
your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment So.00 here - \$0.00 line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 11. Go to line 14.	9a.			, fill in the dollar amount lis	sted \$1,268.00	
contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Total average monthly payment \$0.00 here \(\begin{array}{c} - \sqrt{50.00} \) amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. \[\begin{array}{c} 0. \text{ Go to line 14.} \\ \text{ I. Go to line 12.} \end{array} \)	9b.	-	monthly payment for all mortgages	and other debts secured I	by	
payment Total average monthly payment \$0.00 here → \$0.00 monthly amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☑ 1. Go to line 12.		contractually of	due to each secured creditor in the		r	
Total average monthly payment \$0.00 here - \$0.00 amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Name of the	creditor	-		
Total average monthly payment \$0.00 here - \$0.00 amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Total average monthly payment \$0.00 here - \$0.00 amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Total average monthly payment \$0.00 here - \$0.00 amount on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				+		
Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.			Total average monthly payment	44 44	so on amount on	
Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.	9c.	Net mortgage	or rent expense.			
and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.				, ,		\$1,268.00
why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. ☑ 1. Go to line 12.	-					
□ 0. Go to line 14. □ 1. Go to line 12.						
	11. Loca	0. Go to line 1 1. Go to line 1	on expenses: Check the number of 14.			
-		icle operation	expense: Using the IRS Local Sta			\$196.00

Total average monthly payment \$\frac{\\$537.40}{\\$begin{array}{c} \\$537.40 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	on
13a. Ownership or leasing costs using IRS Local Standard	
13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment A+ Federal Credit Union \$537.40 + Total average monthly payment \$537.40 Copy here \$537.40 Copy Vehicle 1 Copy Vehicle 1 Copy Vehicle 1 Start Vehicle 1 ownership or lease expense. Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.	
13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment A+ Federal Credit Union \$537.40 + Total average monthly payment \$537.40 Copy here \$537.40 Copy Vehicle 3 Copy Vehicle 4 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00	
To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1	
amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment A+ Federal Credit Union \$537.40 + Total average monthly payment \$537.40 Copy here \$537.40 Copy Vehicle 1 Copy here \$537.40 Copy Vehicle 1 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.	
Total average monthly payment Solution Total average monthly payment \$537.40 Copy here \$537.40 Copy here \$537.40 Copy here \$537.40 Copy Vehicle 3 Copy here \$537.40 Solution 3 Copy Vehicle 3 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.	
Total average monthly payment \$537.40 Copy here - \$537.40 line 3 Copy here - \$537.40 line 3 Copy Vehic structure 3 Copy Vehic structure 3 Copy Vehic structure 3 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00	
Total average monthly payment \$537.40 Copy here - \$537.40 line 3 Copy Vehic 3 Copy here - \$537.40 line 3 Copy Vehic 3 Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00 line 3	
13c. Net Vehicle 1 ownership or lease expense. Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. \$0.00 \$ here	eat this ount on 33b.
Vehicle 2 Describe Vehicle 2:	
13d. Ownership or leasing costs using IRS Local Standard	
13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.	
Name of each creditor for Vehicle 2 Average monthly payment	
+	
	eat this ount on 33c.
13f. Net Vehicle 2 ownership or lease expense.	
14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Pu Transportation expense allowance regardless of whether you use public transportation.	y net icle 2 ense \$0.00

Debto	Kimberly Ann Brov	VN Case number (if known)	
15.	also deduct a public transpor	ation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may rtation expense, you may fill in what you believe is the appropriate expense, but you may Local Standard for Public Transportation.	\$0.00
Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses following IRS categories.	s for the
16.	self-employment taxes, social your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, al security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 m the total monthly amount that is withheld to pay for taxes.	\$723.85
	Do not include real estate, sa	ales, or use taxes.	
17.	Involuntary deductions: The union dues, and uniform cos	ne total monthly payroll deductions that your job requires, such as retirement contributions, ts.	\$0.00
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	
18.	filing together, include payme	nonthly premiums that you pay for your own term life insurance. If two married people are ents that you make for your spouse's term life insurance. Do not include premiums for life ts, or a non-filing spouse's life insurance, or for any form of life insurance other than	\$0.00
19.	Court-ordered payments: agency, such as spousal or o	The total monthly amount that you pay as required by the order of a court or administrative child support payments.	\$0.00
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	
20.	as a condition for your job		\$0.00
		ntally challenged dependent child if no public education is available for similar services.	
21.		y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. any elementary or secondary school education.	\$0.00
22.	is required for the health and	enses, excluding insurance costs: The monthly amount that you pay for health care that I welfare of you or your dependents and that is not reimbursed by insurance or paid by a ude only the amount that is more than the total entered in line 7.	\$0.00
	<u>-</u>	ce or health savings accounts should be listed only in line 25.	
23.	for you and your dependents	elephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production sed by your employer.	+\$0.00
		basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	
24.	Add all of the expenses allo Add lines 6 through 23.	owed under the IRS expense allowances.	\$3,375.85

Debto	or 1 Kiml	berly Ann Brown	e number (if known)				
Add	litional Expe	nse Deductions			allowed by the Mea e allowances listed		
25.	insurance, c					e monthly expenses for health sary for yourself, your	
	Health insur	ance		\$178.19			
	Disability ins	surance		\$0.00			
	Health savir	ngs account	+	\$0.00			
	Total			\$178.19	Copy total here	→	\$178.19
	Do you actu	ally spend this total a	mount?				
	☐ No. Ho	ow much do you actua	ally spend?				
	✓ Yes						
26.	will continue member of y	to pay for the reason	able and necessamber of your imm	ary care and suppediate family who	ort of an elderly, cl	monthly expenses that you nronically ill, or disabled or such expenses. These S.C. § 529A(b).	\$0.00
27.						at you incur to maintain the rother federal laws that apply.	\$0.00
	By law, the	court must keep the n	ature of these exp	enses confidenti	al.		
28.	Additional I	home energy costs.	Your home energ	y costs are includ	led in your insuran	ce and operating expenses	
	•	re that you have home fill in the excess amou	•••		he home energy co	osts included in expenses on	
	_	ve your case trustee o		your actual expe	nses, and you mus	t show that the additional	
29.	\$160.42* pe		or your dependen			y expenses (not more than ears old to attend a private or	\$0.00
		ve your case trustee of easonable and necess				t explain why the amount	
	* Subject to	adjustment on 4/01/1	9, and every 3 year	ars after that for o	cases begun on or	after the date of adjustment.	
30.	higher than		d clothing allowar	nces in the IRS N	ational Standards.	od and clothing expenses are That amount cannot be more	
		art showing the maxin		-		ecified in the separate ice.	
	You must sh	now that the additional	l amount claimed	is reasonable and	d necessary.		
31.		charitable contribut to a religious or chari				in the form of cash or financial	+\$0.00

Debtor 1		Kimberly Ann Brown					Case number (if known)						
32.		all of the additional enternational en	ctions.				\$178.19						
Dec	luction	s for Debt Payment											
33.		For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.											
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.												
								verage monthly					
		Mortgages on your	home:										
	33a.	Copy line 9b here					→	\$0.00					
		Loans on your first	two vehicles	:									
	33b.	Copy line 13b here					→	\$537.40					
	33c.	Copy line 13e here					→	\$0.00					
	33d.	List other secured de	ebts:										
		of each creditor for secured debt		Identify property secures the debt		Does pa include t insurance	taxes or						
	Conr	Appliances, Inc.	d/b/a Conn'	Washer & Drye	r	— ☑	No Yes	\$18.33					
							No						
							Yes						
						□	No +	·					
						Ц	Yes		Copy total				
	33e.	Total average month	lly payment.	Add lines 33a throug	gh 33d			\$555.73	here →	\$555.73			
34.	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?												
		payments listed	I in line 33, to	ust pay to a creditor keep possession of de by 60 and fill in th	f your prop	erty (called							
Nar	ne of th	ne creditor	Identify pro secures the		Total cu amount	re		Monthly cure amount					
						÷	60 =						
						÷	60 =						
						÷	60 = +	·					
						-	Total	\$0.00	Copy total	\$0.00			

Debto	or 1	Kin	nberly Ann Brown	Case nun	nber (if known)		
35.	alimo	ny	ve any priority claims such as a priority tax, child support, or that are past due as of the filing date of your bankruptcy case? § 507.				
	1	No.	Go to line 36.				
		Yes.	Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				
			Total amount of all past-due priority claims	–		÷ 60 =	\$0.00
36.	For m	ore i	ligible to file a case under Chapter 13? 11 U.S.C. § 109(e). Information, go online using the link for Bankruptcy Basics specified in the second sec				
	1	No.	Go to line 37.				
	ш,	Yes.	Fill in the following information.				
			Projected monthly plan payment if you were filing under Chapter 13	_			
			Current multiplier for your district as stated on the list issued by the				
			Administrative Office of the United States Courts (for districts in Alaba and North Carolina) or by the Executive Office for United States Trust				
			(for all other districts).	.000		,	
					x%	0	
			To find a list of district multipliers that includes your district, go online	-			
			the link specified in the separate instructions for this form. This list materials be available at the bankruptcy clerk's office.	ay			
			allow so available at the summapley clothe office.	_			
			Average monthly administrative expense if you were filing under Chap	oter 13		Copy total here	
37.			the deductions for debt payment. 33e through 36.				\$555.73
Tota	al Dedi	uctio	ns from Income				
38.	Add a	all of	the allowed deductions.				
			24, All of the expenses allowed under IRS llowances				
	Сору	line 3	32, All of the additional expense deductions \$178.19				
	Сору	line 3	37, All of the deductions for debt payment+\$555.73				
	Total	dedu	ctions \$4,109.77 Co	opy total h	ere →		\$4,109.77
Par	t 3:	D	etermine Whether There Is a Presumption of Abuse				
39.	Calcu	ılate	monthly disposable income for 60 months				
	39a.	Сор	by line 4, adjusted current monthly income \$4,121.05				
	39b.	Сор	by line 38, <i>Total deductions</i> 4,109.77				
	39c.		nthly disposable income. 11 U.S.C. § 707(b)(2). \$11.28 here	-	\$11.28		
		For	the next 60 months (5 years)		x 60		
		- "				1	
	39d.	Tota	al. Multiply line 39c by 60	39d.	\$676.80	Copy here ->	\$676.80

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 96 of 100 $^{01/29/2019}\,_{05:04:33pm}$

ebtor 1		Kim	berly Ann Brown Case n	Case number (if known)						
40. Find o		l out w	whether there is a presumption of abuse. Check the box that applies:							
	The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no preside to the page 5.						of abus	e.		
	The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a pre You may fill out Part 4 if you claim special circumstances. Then go to Part 5.						on of abu	ise.		
		The lii	ne 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.							
	* Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of									
A S		A Su	in the amount of your total nonpriority unsecured debt. If you filled out Summary of Your Assets and Liabilities and Certain Statistical Information Schedules ficial Form 106Sum), you may refer to line 3b on that form.				_			
				2	х.	.25				
	41b.		of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I). iply line 41a by 0.25.	_			Copy here	•		
42.	is e	nough	whether the income you have left over after subtracting all allowed deducto pay 25% of your unsecured, nonpriority debt.	tions						
			e 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. to Part 5.							
	Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.									
Par	t 4:	Gi	ve Details About Special Circumstances							
			ave any special circumstances that justify additional expenses or adjustments of current monthly income for the is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).							
		No.	Go to Part 5.							
	Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.							nt		
You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.										
	Give a detailed explanation of the special circumstances					Average monthly expense or income adjustment				
							•			

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 97 of 100 $^{01/29/2019}\,_{05:04:33pm}$

Debtor 1	Kimberly Ann Brown	Case number (if known)
Part 5:	Sign Below	
By si	gning here, I declare under penalty of perjury that	at the information on this statement and in any attachments is true and correct.
χ <u>/s</u>	s/ Kimberly Ann Brown	X
K	imberly Ann Brown, Debtor 1	Signature of Debtor 2
D	ate 1/29/2019	Date
	MM / DD / YYYY	MM / DD / YYYY

19-10119-tmd Doc#1 Filed 01/29/19 Entered 01/29/19 17:05:46 Main Document Pg 98 of 100 $\frac{100}{100}$

Current Monthly Income Calculation Details

In re: Kimberly Ann Brown

Case Number: Chapter: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if available)						
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month

Debtor PSN Services

\$1,861.74 \$3,683.45 \$3,766.95 \$4,183.70 \$6,121.11 \$5,109.34 **\$4,121.05**

Underlying Allowances (as of 01/29/2019)

In re: Kimberly Ann Brown

Case Number: Chapter: 7

Median Income Information							
State of Residence	Texas						
Household Size	1						
Median Income per Census Bureau Data	\$48,948.00						

National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous						
Region	US					
Family Size	1					
Gross Monthly Income	\$4,121.05					
Income Level	Not Applicable					
Food	\$334.00					
Housekeeping Supplies	\$35.00					
Apparel and Services	\$89.00					
Personal Care Products and Services	\$38.00					
Miscellaneous	\$151.00					
Additional Allowance for Family Size Greater Than 4	\$0.00					
Total	\$647.00					

National Standards: Health Care (only applies to cases filed on or after 1/1/08)						
Household members under 65 years of age						
Allowance per member \$52.00						
Number of members	1					
Subtotal	\$52.00					
Household members 65 years of age or olde	r					
Allowance per member	\$114.00					
Number of members	0					
Subtotal	\$0.00					
Total	\$52.00					

Local Standards: Housing and Utilities						
State Name	Texas					
County or City Name	Travis County					
Family Size	Family of 1					
Non-Mortgage Expenses	\$489.00					
Mortgage/Rent Expense Allowance	\$1,268.00					
Minus Average Monthly Payment for Debts Secured by Home	\$0.00					
Equals Net Mortgage/Rental Expense	\$1,268.00					
Housing and Utilities Adjustment	\$0.00					

Underlying Allowances (as of 01/29/2019)

In re: Kimberly Ann Brown

Case Number: Chapter: **7**

Local Standards: Transportation; Vehicle Operation/Public Transportation							
Transportation Region		South Region	South Region				
Number of Vehicles Opera	ted	1					
Allowance		\$196.00					
Loc	Local Standards: Transportation; Additional Public Transportation Expense						
Transportation Region		South Region					
Allowance (if entitled)		\$178.00					
Amount Claimed		\$0.00	\$0.00				
	Local Standards: Trans	portation; Ownersl	nip/Lease Expense				
Transportation Region		South Region	South Region				
Number of Vehicles with O	wnership/Lease Expense	1	1				
	First Car		Second Car				
Allowance	\$497.00						
Minus Average Monthly Payment for Debts Secured by Vehicle	\$537.40						
Equals Net Ownership / Lease Expense \$0.00							